| Fill in this information to identify your case: | |
|---|---|
| United States Bankruptcy Court for the: District Of Washington Eastern | |
| Case number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|--|---|--|--|
| 1. Your full name | | | | |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting | Christopher First name David Middle name Smith Last name | First name Middle name Last name | | |
| with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) | | |
| All other names you have used in the last 8 years | First name | First name | | |
| Include your married or maiden names. | Middle name | Middle name | | |
| | Last name | Last name | | |
| | First name | First name | | |
| | Middle name | Middle name | | |
| | Last name | Last name | | |
| 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx - xx - <u>7</u> <u>9</u> <u>1</u> <u>2</u> OR 9 xx - xx | xxx - xx | | |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

irst Name

| М | idd | le | N: | am | e | |
|---|-----|----|----|----|---|--|

Last Name

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers | ☑ I have not used any business names or EINs. | ☐ I have not used any business names or EINs. |
| | (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name | Business name |
| | | Business name | Business name |
| | | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 5031 W. Clearwater Avenue, #68 Number Street | Number Street |
| | | KennewickWA99336CityStateZIP Code | City State ZIP Code |
| | | BENTON County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |
| | | | |

Christopher David Smith
First Name Middle Name

| rst Name | Middle | Name |
|----------|--------|------|

| | | _ | | - | _ | - |
|-----|----|----|------|-------|---|-------|
| act | Na | ma | | | | |

| Case number (if known) | |
|------------------------|--|
|------------------------|--|

| Pa | rt | 2: |
|----|----|----|

Tell the Court About Your Bankruptcy Case

| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | ruptcy (Foter 7 oter 11 oter 12 | | | | | | | |
|-----|---|---|--|--|--------------------------------|--|--|--|--|--|
| 8. | How you will pay the fee | loca your subr with I nee App I rec By la | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to | | | | | | | |
| | | pay | the fee | | is option, you m | ust fill out the Application to Have the | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ☑ No ☐ Yes. | District | When | MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | | | | |
| 10 | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☑ No ☐ Yes. | District | | MM/DD/YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | | | | |
| 11. | . Do you rent your residence? | □ No. ĭ Yes. | No. Yes | our landlord obtained an eviction judge b. Go to line 12. | | ? t Against You (Form 101A) and file it as | | | | |

| Pa | rt 3: Report About Any E | usiness | es You Own as a Sol | e Proprietor | | | | | |
|-----|--|--------------------|--|-------------------------------|-------------------------------|---|---|--|--|
| 12. | Are you a sole proprietor | X No | Go to Part 4 | | | | | | |
| | of any full- or part-time business? | | No. Go to Part 4. Yes. Name and location of business | | | | | | |
| | A sole proprietorship is a | | | | | | | | |
| | business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | | | | |
| | a corporation, partnership, or LLC. | | Number Street | | | ······ | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | | | | | | | |
| | to this petition. | | City | | State | ZIP Code | | | |
| | | | Check the appropriate bo | x to describe your business: | | | | | |
| | | | | (as defined in 11 U.S.C. § 1 | 01(27A)) | | | | |
| | | | ☐ Single Asset Real Est | ate (as defined in 11 U.S.C. | § 101(51B)) | | | | |
| | | | ☐ Stockbroker (as defin | ed in 11 U.S.C. § 101(53A)) | | | | | |
| | | | ☐ Commodity Broker (a | s defined in 11 U.S.C. § 101 | (6)) | | | | |
| | | | ☐ None of the above | | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business | can set most re | <i>appropriate deadlines.</i> If y cent balance sheet, statem | ou indicate that you are a sm | nall business statement, a | mall business debtor so that it debtor, you must attach your nd federal income tax return or if 16(1)(B). | | | |
| | debtor? | ĭ No. | I am not filing under Chap | oter 11. | | | | | |
| | For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D). | ☐ No. | I am filing under Chapter the Bankruptcy Code. | 11, but I am NOT a small bu | siness debto | r according to the definition in | | | |
| | | ☐ Yes. | I am filing under Chapter Bankruptcy Code. | 11 and I am a small busines | s debtor acco | ording to the definition in the | | | |
| Pa | rt 4: Report if You Own | or Have | Any Hazardous Prope | erty or Any Property Tha | at Needs Ir | nmediate Attention | | | |
| 14. | Do you own or have any | ĭ No | | | | | | | |
| | property that poses or is alleged to pose a threat | | What is the hazard? | | | | | | |
| | of imminent and | | What is the Hazara. | | | | - | | |
| | identifiable hazard to public health or safety? | | | | | | - | | |
| | Or do you own any | | | | | | | | |
| | property that needs immediate attention? | | If immediate attention is | needed, why is it needed?_ | | | - | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | | | - | | |
| | - , | | Where is the property? | | | | _ | | |

Official Form 101

City

Number

Street

ZIP Code

State

rst Name Middle Name

Last Name

Case number (if known)______

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| A 1. | | n - | 1.4. | | |
|------|-----|------------|------|------|----|
| Ab | out | De | ord |)r ' | 1: |

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to | receive | a briefing | about |
|----------------------|---------|------------|-------|
| credit counseling be | cause o | f: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

| I am not required to receive a briefing a | bout |
|---|------|
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Part 6: Answer These Qu | estions for Reporting Purpo | ses | | | | |
|--|---|--|--|--|--|--|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. | | | | | |
| | Yes. Go to line 17. | | | | | |
| | | arily business debts? Business debt nvestment or through the operation of t | ots are debts that you incurred to obtain he business or investment. | | | |
| | No. Go to line 16c. | | | | | |
| | Yes. Go to line 17. | | | | | |
| | 16c. State the type of debts yo | ou owe that are not consumer debts or l | business debts. | | | |
| 17. Are you filing under Chapter 7? | ☐ No. I am not filing under C | Chapter 7. Go to line 18. | | | | |
| Do you estimate that after any exempt property is | Yes. I am filing under Chap administrative expens | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | | |
| excluded and administrative expenses | ⊠ No | | | | | |
| are paid that funds will be available for distribution to unsecured creditors? | e Yes | | | | | |
| 18. How many creditors do | ☑ 1-49 | 1 ,000-5,000 | 25,001-50,000 | | | |
| you estimate that you owe? | 50-99 | 5,001-10,000 | 50,001-100,000 | | | |
| owe: | ☐ 100-199 ☐ 200-999 | 10,001-25,000 | ☐ More than 100,000 | | | |
| 19. How much do you | × \$0-\$50,000 | □ \$1,000,001-\$10 million | □ \$500,000,001-\$1 billion | | | |
| estimate your assets to be worth? | \$50,001-\$100,000 | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion | | | |
| be worth: | □ \$100,001-\$500,000 □ \$500,001-\$1 million | □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million | ☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion | | | |
| 20. How much do you | \$0-\$50,000 | □ \$1,000,001-\$10 million | □ \$500,000,001-\$1 billion | | | |
| estimate your liabilities | ¥50,001-\$100,000 | □ \$10,000,001-\$50 million | □ \$1,000,000,001-\$10 billion | | | |
| to be? | \$100,001-\$500,000 | \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion | | | |
| Part 7: Sign Below | ☐ \$500,001-\$1 million | □ \$100,000,001-\$500 million | ☐ More than \$50 billion | | | |
| For you | I have examined this petition, correct. | and I declare under penalty of perjury the | nat the information provided is true and | | | |
| | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | I request relief in accordance v | with the chapter of title 11, United State | s Code, specified in this petition. | | | |
| | I understand making a false statement, concealing property, or obtaining money or property by fraud in connect with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | /s/ Christopher David Sm | ith | | | | |
| | Signature of Debtor 1 | | ture of Debtor 2 | | | |
| | Executed on <u>05/09/2018</u> MM / DD | | ated on | | | |

| Debtor 1 | Christopher | David | Smit |
|----------|-------------|-------|------|
| | | | |

First Name Middle Name

Case number (if known)______

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Gregory L. Lutcher | Date | 05/09/2018 |
|--------------------------------------|---------------|---------------------|
| Signature of Attorney for Debtor | | MM / DD /YYYY |
| Gregory L. Lutcher Printed name | | |
| Gregory L. Lutcher, PS Firm name | | |
| 6 E. Alder, Ste 317 Number Street | | |
| Walla Walla | | 99362 |
| City | State | ZIP Code |
| Contact phone (509) 529-2200 | Email address | gllutcher@gmail.com |
| 04806 | WA | |
| Bar number | State | |

Chevron/Synchrony Bank Clearwater Square Apartments Gesa Credit Union PO Box 530950 5031 W. Clearwater Avenue PO Box 500 Atlanta, GA 30353-0950 Kennewick, WA 99336 Richland, WA 99352-0500

Gesa Credit Union

PO Box 660493

Dallas, TX 75266-0493

Les Schwab Tires

1735 SE Meadowbrook Blvd.

College Place, WA 99324

Numerica Credit Union

PO Box 4000

Spokane Valley, WA 99037

Portfolio Recovery Associates, Synchrony Bank Synchrony Bank – JCP PO Box 960061 PO Box 960090 Orlando, FL 32896-0061 Orlando, FL 32896-0090 Norfolk, VA 23541

 Target Card Services
 U.S. Bank
 Walmart/Synchrony Bank

 PO Box 660170
 PO Box 790408
 PO Box 530927

 Dallas, TX 75266-0170
 St. Louis, MO 63179-0408
 Atlanta, GA 30353-0927

UNITED STATES BANKRUPTCY COURT District of Washington Eastern

| Christopher David Smith | | Case No. | |
|--|--|--|--|
| | Debtors | Chapter <u>7</u> | |
| | VERIFICATION OF | CREDITOR MATRIX | |
| The above named debtor(s), or debtor's attorney if applicable attached Master Mailing List of creditors is complete, correct and Local Bankruptcy Rules and I/we assume all responsibility for errors. | | consistent with the debtor's schedules pursuant to | |
| Dated: | May 9, 2018 | Signed: /s/ Christopher David Smith | |
| Dated: | | Signed: | |
| Signed: | /s/ Gregory L. Lutcher Gregory L. Lutcher Attorney for Debtor(s) | | |
| | Bar no.: 04806 6 E. Alder, Ste 317 Walla Walla, Washington 99362 Telephone No: (509) 529-2200 Fax No: (509) 529-2202 | | |
| | E-mail address: gllutcher@gmail.com | | |

| Fill in this information to identify your case and this filing: | | | | | |
|--|------------------------|----------------------|--------------------|--|--|
| Debtor 1 | Christopher First Name | David Middle Name | Smith Last Name | | |
| Debtor 2 (Spouse, if filing | | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: District of Washington Eastern | | | | | |
| Case number | | | | | |

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Part 1:

| Υe | es. Where is the property? | | | |
|--------------|---|---|--|--|
| .1. | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on Schedule |
| | Street address, if available, or other description | □ Condominium or cooperative□ Manufactured or mobile home□ Land | Current value of the entire property? | Current value of portion you own |
| | City State ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | | Who has an interest in the property? Check one. | | |
| | County | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is co | ommunity property |
| | | The loads one of the debtors and another | | |
| / 011 | own or have more than one list here: | Other information you wish to add about this ite property identification number: | | |
| /ou .2. | own or have more than one, list here: | | | d claims on Schedule |
| | own or have more than one, list here: Street address, if available, or other description | property identification number: What is the property? Check all that apply. Gingle-family home | Do not deduct secured clause the amount of any secure | d claims on Schedule ms Secured by Propen |
| | | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured class the amount of any secure Creditors Who Have Claim | d claims on Schedule ms Secured by Proper Current value of portion you own |
| | | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? | d claims on Schedule ms Secured by Proper Current value of portion you own \$ of your ownership simple, tenancy b |
| | Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee | d claims on Schedule ms Secured by Proper Current value of portion you own \$ of your ownership simple, tenancy b |
| | Street address, if available, or other description City State ZIP Code | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee | d claims on Schedule ms Secured by Proper Current value of portion you own \$ of your ownership simple, tenancy b |
| | Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee | d claims on Schedule ms Secured by Proper Current value of portion you own \$ of your ownership simple, tenancy b e estate), if known |

| Debtor 1 | Christopher Da | vid Smith Name Last Name | Case number (if ke | nown) | |
|----------------------------------|---|--|---|---|--|
| 1.3. | Street address, if available | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of the entire of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ |
| | City | State ZIP Code | ☐ Timeshare ☐ Other | interest (such as fee the entireties, or a life | simple, tenancy by |
| | County | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co | ommunity property |
| | | | Other information you wish to add about this ite property identification number: | | |
| you own | | al or equitable interes | st in any vehicles, whether they are registered or re, also report it on Schedule G: Executory Contracts a | | S |
| 0. Gars , □ No ☑ Ye | 0 | , oport unity verifices | , | | |
| 3.1. | Make: Model: | Jeep Cherokee | Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on Schedule D: |
| | Year: Approximate mileage: | <u>2017</u> <u>12000</u> | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| lf vou | Other information: own or have more than | one departs before | ☐ Check if this is community property (see instructions) | \$ <u>26,000.00</u> | \$ <u>26,000.00</u> |
| 3.2. | Make: Model: | —————————————————————————————————————— | Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on Schedule D: |
| | Year: Approximate mileage: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |

Official Form 106A/B 18-01321-FLK7

Other information:

☐ Check if this is community property (see instructions)

| D - l-4 | | |
|---------|---|--|
| Debtor | Т | |

Christopher David
First Name Middle Name Middle Name Smith Last Name

Case number (if known)_

| | 3.3. | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | | |
|----|--------|---|---|--|------------------------|--|
| | | Model: | Debtor 1 only | the amount of any secured Creditors Who Have Clain | | |
| | | Year: | Debtor 2 only | Current value of the | Current value of the | |
| | | Approximate mileage: | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire property? | portion you own? | |
| | | Other information: | At least one of the deptors and another | | | |
| | | Other information. | ☐ Check if this is community property (see | \$ | \$ | |
| | | | instructions) | | | |
| | | | | | | |
| | 3.4. | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla the amount of any secured | | |
| | | Model: | Debtor 1 only | Creditors Who Have Claims Secured by Property. | | |
| | | Year: | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the | Current value of the | |
| | | Approximate mileage: | At least one of the debtors and another | entire property? | portion you own? | |
| | | Other information: | — At least one of the deptors and another | | | |
| | | | ☐ Check if this is community property (see | \$ | \$ | |
| | | | instructions) | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 1 | Water | craft aircraft motor homes ATVs and other | r recreational vehicles, other vehicles, and access | sories | | |
| | | | ft, fishing vessels, snowmobiles, motorcycle accessor | | | |
| | □ No | • | , | | | |
| | ⊠ Ye | | | | | |
| | | | | | | |
| | 4.1. | Make: Flagstaff | Who has an interest in the property? Check one. | Do not deduct secured cla | ims or exemptions. Put | |
| | | Model: See Attachment 1 | ☑ Debtor 1 only | the amount of any secured | | |
| | | Year: 2010 | Debtor 2 only | Creditors Who Have Claims Secured by Property. | | |
| | | | Debtor 1 and Debtor 2 only | Current value of the | Current value of the | |
| | | Other information: | ☐ At least one of the debtors and another | entire property? | portion you own? | |
| | | | Check if this is community property (200 | F F07 F0 | | |
| | | | ☐ Check if this is community property (see instructions) | <u>\$5,597.56</u> | \$ | |
| | | | , in the second | | | |
| | | | | | | |
| | If you | own or have more than one, list here: | | | | |
| | 4.2. | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | | |
| | | Model: | Debtor 1 only | the amount of any secured Creditors Who Have Clain | | |
| | | Year: | Debtor 2 only | Current value of the | Current value of the | |
| | | Other information: | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire property? | portion you own? | |
| | | | At least one of the debtors and another | | | |
| | | | ☐ Check if this is community property (see | \$ | \$ | |
| | | | instructions) | | | |
| | | | | | | |
| | | | | | | |
| | | | | <u>-</u> | | |
| 5. | Add t | he dollar value of the portion you own for al | I of your entries from Part 2, including any entries | for pages | \$ 26,000.00 | |
| | | | ere | | <u>\$_20,000.00</u> | |
| | | | | L | | |
| | | | | | | |

Smith Last Name

Part 3: **Describe Your Personal and Household Items**

| Do | you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|-----|---|--|
| 6 | Household goods and furnishings | |
| 0. | Examples: Major appliances, furniture, linens, china, kitchenware | |
| | □ No □ Yes. Describe major appliances, furniture, linens, china, kitchenware | \$1,000.00 |
| 7 | Electronics | |
| • | Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games | |
| | □ No □ Yes. Describetelevision, cell phone, computer | \$700.00 |
| 8. | Collectibles of value | |
| | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No | |
| | Yes. Describe | \$ |
| 9. | Equipment for sports and hobbies | |
| | Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments | |
| | □ No □ Yes. Describefishing poles, etc. | <u>\$15.00</u> |
| 10. | Firearms | |
| | Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | □ No □ Yes. DescribeRuger 9mm pistol | \$ 300.00 |
| 11. | Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No | |
| | Yes. Describe | \$ |
| 12. | Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | |
| | ☐ Yes. Describe | \$ |
| 13. | Non-farm animals Examples: Dogs, cats, birds, horses | |
| | ☐ Yes. Describe | \$ |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list | |
| | ☑ No | |
| | Yes. Give specific information | \$ |
| 15. | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here | \$2,015.00 |

Describe Your Financial Assets

| Do you own or have any l | egal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|---|----------------------------------|--|
| 16. Cash <i>Examples:</i> Money you h | ave in your wallet, in your home, in a safe deposit box, and on | hand when you file your petition | |
| ☐ No ☑ Yes | | Cash: | \$ <u>3.00</u> |
| | vings, or other financial accounts; certificates of deposit; share illar institutions. If you have multiple accounts with the same in | | |
| ☑ Yes | Institution name: | | |
| 18. Bonds, mutual funds, o <i>Examples:</i> Bond funds, i | 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: | unts | \$ 200.00 \$ |
| ☑ No ☐ Yes | Institution or issuer name: | | |
| | | | • |
| | | | |
| 19. Non-publicly traded st an LLC, partnership, a | ock and interests in incorporated and unincorporated busing joint venture | nesses, including an interest in | |
| ĭ No | Name of entity: | % of ownership: | |
| Yes. Give specific information about | | % | \$ |
| them | | % | \$ |
| | | % | \$ |
| | | | |

| Debtor | 1 |
|--------|---|
| Debloi | |

| Christopher | David |
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| CI | matopn | | aviu |
|---------|--------|------|---------|
| Firet I | Name | Mide | lle Nam |

| Smith | | |
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| Case number (if known) |
|------------------------|
|------------------------|

| ☑ No | | | |
|--|--|---|---|
| Yes. Give specific | Issuer name: | | |
| information about them | | | \$ |
| | | | \$ |
| | | | \$ |
| tirement or pension amples: Interests in IF | | on (k), 403(b), thrift savings accounts, or other pension or profit-sharing | ng plans |
| No Yes. List each account separately | Type of account: | Institution name: | |
| account separately | | Courthorn Clayers | \$ 925.61 |
| | 401(k) or similar plan: | | · · · · · · · · · · · · · · · · · · · |
| | Pension plan: | Teamsters Pension Trust monthly amount | <u>\$332.00</u> |
| | IRA: | | \$ |
| | Retirement account: | | |
| | Keogh: | | \$ |
| | Additional account: | | \$ |
| | | | |
| | l deposits you have m | ade so that you may continue service or use from a company | |
| Your share of all unused Examples: Agreements v | prepayments I deposits you have m | | |
| our share of all unused Examples: Agreements of ompanies, or others | prepayments I deposits you have m | ade so that you may continue service or use from a company | |
| our share of all unused ixamples: Agreements of impanies, or others No | prepayments I deposits you have m with landlords, prepaid | ade so that you may continue service or use from a company | |
| our share of all unused Examples: Agreements wompanies, or others No | prepayments I deposits you have m with landlords, prepaid Ins Electric: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | |
| our share of all unused fixamples: Agreements wompanies, or others No | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | \$ |
| our share of all unused fixamples: Agreements wompanies, or others No | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ |
| our share of all unused ixamples: Agreements of ompanies, or others | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | \$ \$ |
| our share of all unused Examples: Agreements of all unused Examples on others No | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ \$ \$ |
| our share of all unused ixamples: Agreements of ompanies, or others | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |
| our share of all unused Examples: Agreements wompanies, or others No | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ \$ \$ |
| our share of all unused Examples: Agreements of all unused Examples on others No | prepayments I deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ |
| our share of all unused fixamples: Agreements wompanies, or others No | prepayments I deposits you have m with landlords, prepaid Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |
| Your share of all unused Examples: Agreements of all unused ompanies or others No Yes | prepayments I deposits you have m with landlords, prepaid Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ |
| Your share of all unused Examples: Agreements of companies, or others No Yes | prepayments I deposits you have m with landlords, prepaid Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ |
| Your share of all unused Examples: Agreements of companies, or others To No The Yes | prepayments I deposits you have m with landlords, prepaid Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications titution name or individual: tal unit: | \$ |
| Your share of all unused Examples: Agreements of companies, or others No Yes | prepayments I deposits you have m with landlords, prepaid Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications titution name or individual: tal unit: | \$ |

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| Smith | |
|-----------|--|
| Last Name | |

| 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 | ount in a qualified ABLE program, or under a qualified sta (b)(1). | te tuition program. | |
|---|---|-------------------------|---|
| No Yes Institution | name and description. Separately file the records of any intere | ests.11 U.S.C. § 521(c) | ı: |
| | | | ¢. |
| | | | Ф |
| | | | \$ \$ |
| | | | Φ |
| 25. Trusts, equitable or future interests in pexercisable for your benefit | property (other than anything listed in line 1), and rights or | powers | |
| No | | | _ |
| Yes. Give specific information about them | | | \$ |
| 26. Patents, copyrights, trademarks, trade Examples: Internet domain names, websi | secrets, and other intellectual property tes, proceeds from royalties and licensing agreements | | |
| Yes. Give specific information about them | | | \$ |
| 27. Licenses, franchises, and other genera | | | - |
| | nses, cooperative association holdings, liquor licenses, profes | sional licenses | |
| ☑ No | | | 7 |
| Yes. Give specific information about them | | | \$ |
| Money or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax refunds owed to you | | | |
| ⊠ No | | | |
| Yes. Give specific information | | Federal: | \$ |
| about them, including whether you already filed the returns | | State: | 5 |
| and the tax years | | | <u> </u> |
| | | Local. | μ |
| | , spousal support, child support, maintenance, divorce settlem | ent, property settlemer | nt |
| ☑ No | | | |
| Yes. Give specific information | | Alimony: | \$ |
| | | Maintenance: | \$ |
| | | Support: | \$ |
| | | Divorce settlement: | \$ |
| | | Property settlement: | \$ |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insura Social Security benefits; unpa | ance payments, disability benefits, sick pay, vacation pay, word loans you made to someone else | kers' compensation, | |
| ☑ No | | | - |
| ☐ Yes. Give specific information | . | | |
| | | | \$ |

| Debtor 1 | Christopher David | Smith | Case number (if known) |
|----------|-------------------|-------|------------------------|
| | | | |

| 31. | Interests in insurance policies Examples: Health, disability, or life in | nsurance: health savings account (HS | SA); credit, homeowner's, or renter's insurance | |
|-----|---|---|---|---|
| | ĭ No | 3 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | Yes. Name the insurance compare of each policy and list its val | | Beneficiary: | Surrender or refund value: |
| | | | | _ \$ |
| | | | | _ \$ |
| | | | | _ \$ |
| 32. | Any interest in property that is due If you are the beneficiary of a living tr property because someone has died. No | rust, expect proceeds from a life insu | I grance policy, or are currently entitled to receive | |
| | ☐ Yes. Give specific information | | | |
| | · | | | \$ |
| 33. | Claims against third parties, wheth Examples: Accidents, employment di No Yes. Describe each claim | isputes, insurance claims, or rights to | | e e |
| | | | | \$ |
| 34. | Other contingent and unliquidated to set off claims No | claims of every nature, including | counterclaims of the debtor and rights | |
| | ☐ Yes. Describe each claim | | | \$ |
| | | | | |
| | | | | |
| 35. | Any financial assets you did not al | ready list | | |
| | ☑ No | | | |
| | Yes. Give specific information | | | \$ |
| 36 | Add the dollar value of all of your | entries from Part 4 including any | entries for pages you have attached | |
| | | | | <u>\$1,460.61</u> |
| | | | | |
| | | | | |
| Pa | rt 5: Describe Any Busine | ess-Related Property You | Own or Have an Interest In. List any | real estate in Part 1. |
| 07 | De veu eur er heve env legel er e | avitable interest in any business a | oloted managers 2 | |
| 37. | Do you own or have any legal or ed No. Go to Part 6. | quitable interest in any business-r | elated property? | |
| | Yes. Go to line 38. | | | |
| | Tes. do to line 30. | | | Current value of the |
| | | | | portion you own? |
| | | | | Do not deduct secured claims or exemptions. |
| 00 | Accounts resolvable or commission | ana vari almaadir aarmad | | or exemptions. |
| 38. | Accounts receivable or commissio | ons you aiready earned | | |
| | Yes. Describe | | | |
| | — 103. D030HDG | | | \$ |
| 39. | Office equipment, furnishings, and | d supplies | | |
| | Examples: Business-related computers, so | | achines, rugs, telephones, desks, chairs, electronic device | es |
| | ĭ No | | | |
| | Yes. Describe | | | \$ |
| | I I | | | · · |

| _ | | | |
|----|------|---|--|
| De | btor | 1 | |

| Christopher Dav |
|-----------------|
|-----------------|

First Name Middle Name

| Smith | | |
|-------|--|--|
| | | |

| Case number | (if known) |)) | | |
|-------------|------------|----|--|--|
| | | | | |

| 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade | |
|--|--|
| ☑ No ☐ Yes. Describe | \$ |
| 11. Inventory No Yes. Describe | \$ |
| 42. Interests in partnerships or joint ventures | |
| ☑ No☐ Yes. Describe Name of entity:% of ownership: | |
| | \$ \$ \$ |
| 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | Ψ |
| ✓ No ✓ Yes. Describe | \$ |
| 14. Any business-related property you did not already list No Yes. Give specific information | \$ |
| | \$ \$ \$ |
| | \$ \$ |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here | \$0.00 |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. | |
| | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. Farm animals Examples: Livestock, poultry, farm-raised fish No | |
| ☐ Yes | \$ |

Official Form 106A/B 18-01321-FLK7

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| Case number | (if known) |)) | | |
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| | | | | |

| 48. Crops—either growing or harvested | | | |
|---|-------------------------|--------------------------------|----------------------|
| ☐ Yes. Give specific information | | | \$ |
| 49. Farm and fishing equipment, implements, machinery, fixtures, ☑ No ☐ Yes | and tools of trade | | |
| Tes | | | \$ |
| 50. Farm and fishing supplies, chemicals, and feed | | | |
| ☑ No☐ Yes | | | |
| | | | \$ |
| 51. Any farm- and commercial fishing-related property you did not | already list | | |
| ☑ No☑ Yes. Give specific | | | |
| information | | | \$ |
| 52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here | | - | \$ <u>0.00</u> |
| | | | |
| Part 7: Describe All Property You Own or Have an | n Interest in That | You Did Not List Above | |
| 53. Do you have other property of any kind you did not already list | 1? | | |
| Examples: Season tickets, country club membership | | | |
| ☑ No☑ Yes. Give specific | | | \$ |
| information | | | \$ |
| | | | Φ |
| 54. Add the dollar value of all of your entries from Part 7. Write tha | t number here | | \$ |
| | | | |
| Part 8: List the Totals of Each Part of this Form | | | |
| 55. Part 1: Total real estate, line 2 | | ······ | \$ <u>0.00</u> |
| 56. Part 2: Total vehicles, line 5 | \$26,000.00 | - | |
| 57. Part 3: Total personal and household items, line 15 | \$ <u>2,015.00</u> | | |
| 58. Part 4: Total financial assets, line 36 | \$ <u>1,460.61</u> | - | |
| 59. Part 5: Total business-related property, line 45 | \$ <u>0.00</u> | | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ <u>0.00</u> | | |
| 61. Part 7: Total other property not listed, line 54 | + \$ <u>0.00</u> | - | |
| 62. Total personal property. Add lines 56 through 61 | \$ <u>29,475.61</u> | Copy personal property total 🗲 | + \$29,475.61 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$29,475.61 |

Attachment Debtor: Christopher David Smith Case No:

Attachment 1

176 limited pop up trailer

| Fill in this information to identify your case: | | | | |
|--|-------------|-------------|-----------|--|
| Debtor 1 | Christopher | David | Smith | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: District of Washington Eastern | | | | |
| Case number (If known) | | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pá | Identify the Property You Claim | as Exempt | | | | | | | |
|----|---|--|--|------------------------------------|--|--|--|--|--|
| | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | | |
| | Brief major appliances, furniture, linens, description: china, kitchenware Line from Schedule A/B: 6 | \$ <u>1,000.00</u> | ∑ \$ 1,000.00 100% of fair market value, up to any applicable statutory limit | 11 USC § 522(d)(3) | | | | | |
| | Brief description: television, cell phone, computer Line from Schedule A/B: 7 | \$_700.00 | ▼ 700.00□ 100% of fair market value, up to any applicable statutory limit | 11 USC § 522(d)(3) | | | | | |
| | Brief description: fishing poles, etc. Line from Schedule A/B: 9 | \$ 15.00 | \$ \$ 100% of fair market value, up to any applicable statutory limit | 11 USC § 522(d)(5) | | | | | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 you No Yes. Did you acquire the property covered by No No Yes | years after that for cases | , | 1 | | | | | |

| Case number (if known) | |
|------------------------|--|
|------------------------|--|

Part 2:

Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: Ruger 9mm pistol | \$300.00 | \$ | 11 USC § 522(d)(5) |
| Line from Schedule A/B: 10 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: CASH | \$ <u>3.00</u> | □ \$ | 11 USC § 522(d)(5) |
| Line from Schedule A/B: 16 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Checking Account with | <u>\$</u> 200.00 | □ \$ | 11 USC § 522(d)(5) |
| Line from Schedule A/B: 17.1 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| Brief 401(k) or Similar Plan with description: Southern Glazers | <u>\$</u> 925.61 | = \$ | 11 USC § 522(d)(12) |
| Line from Schedule A/B: 21 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: \$332.00 per month benefit | \$ <u>332.00</u> | ■ \$ <u>332.00</u> | 11 USC § 522(d)(12) |
| Line from Schedule A/B: 21 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | - \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | - \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
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| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | - \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |

| Fill in this in | nformation to identify | your case: | | | | |
|--|--|--|--|---|--|--------------------|
| Debtor 1 | Christopher David | | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| (Spouse, if filing | , | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | District of Wash | nington Eastern | | | |
| Case number | | | | | ☐ Check if | this is an |
| (II Idiowii) | | | | | amende | |
| nformation additional p 1. Do any | . If more space is need pages, write your name creditors have claims | ded, copy the Add e and case number secured by your p mit this form to the a tion below. | | and attach it to this | form. On the top of a | iny |
| Part 1: | | | | | | |
| 2. List all s | claim. If more than one | e creditor has a part | n one secured claim, list the creditor separately ticular claim, list the other creditors in Part 2. order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | |
| 2. List all s for each As much | claim. If more than one | e creditor has a part aims in alphabetical | ticular claim, list the other creditors in Part 2. | Amount of claim Do not deduct the | Value of collateral that supports this claim | Unsecur portion |
| 2. List all s for each As much 2.1 Gesa Creditor's | claim. If more than one as possible, list the cla | e creditor has a partaims in alphabetical | ticular claim, list the other creditors in Part 2. order according to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | If any |

Column C Unsecured portion If any Contingent Richland Unliquidated ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 2.2 \$1,106.98 \$1,106.98 Describe the property that secures the claim: Les Schwab Tires Creditor's Name tires 1735 SE Meadowbrook Blvd. Number As of the date you file, the claim is: Check all that apply. ☐ Contingent College Place 99324 ■ Unliquidated WA ZIP Code ■ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit ■ At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number \$6,654.95 Add the dollar value of your entries in Column A on this page. Write that number here:

| Case number | (if known) | |
|-------------|------------|--|
| | | |

| Pa | art 1: | Additional Page After listing any entries on this p by 2.4, and so forth. | page, number them beginning with 2.3, followed | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|----|----------------|---|---|---|--|-----------------------------------|
| 23 | | erica Credit Union | Describe the property that secures the claim: | \$ <u>31,158.80</u> | \$ <u>26,000.00</u> | \$ <u>10,706.77</u> |
| | PO E | Box 4000 | 2017 Jeep Cherokee with 12000 miles. | | | |
| | Spok City | kane Valley WA 99037 State ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | |
| ' | Who ow | es the debt? Check one. | Nature of lien. Check all that apply. | | | |
| [| Debte At lease | or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another ck if this claim relates to a munity debt | An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | | |
| ı | | bt was incurred | Last 4 digits of account number | | | |
| 24 | 1 | | Describe the property that accurre the eleien- | \$ | \$ | <u> </u> |
| | Creditor | 's Name | Describe the property that secures the claim: | \$ 1 | \$ | \$ |
| | Number | Street | | | | |
| | City | State ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | |
| | _ | es the debt? Check one. | Nature of lien. Check all that apply. | | | |
| | ☐ Debt | or 1 only or 2 only | An agreement you made (such as mortgage or secured | | | |
| ĺ | | or 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | | | |
| l | At lea | ast one of the debtors and another | Judgment lien from a lawsuit | | | |
| [| | ck if this claim relates to a munity debt | Other (including a right to offset) | | | |
| ı | Date del | bt was incurred | Last 4 digits of account number | | | |
| 25 | | | Describe the property that secures the claim: | \$ | \$ | \$ |
| | Creditor | 's Name | | | | |
| | Number | Street | | | | |
| | | | As of the date you file, the claim is: Check all that apply. | | | |
| | City | State ZIP Code | ☐ Contingent☐ Unliquidated☐ Disputed | | | |
| 1 | Who ow | es the debt? Check one. | Nature of lien. Check all that apply. | | | |
| | Debt | • | An agreement you made (such as mortgage or secured | | | |
| (| | or 2 only or 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | | | |
| l | | ast one of the debtors and another | Judgment lien from a lawsuit | | | |
| (| | ck if this claim relates to a munity debt | Other (including a right to offset) | | | |
| ı | Date del | bt was incurred | Last 4 digits of account number | | | |
| | Α | dd the dollar value of your entries | s in Column A on this page. Write that number here: | _{\$} 31,158.80 | | |
| | | this is the last page of your form, rite that number here: | add the dollar value totals from all pages. | \$ 37,813.75 | | |

Attachment Debtor: Christopher David Smith Case No:

Attachment 1

99352-0500

| Fill in this information to identify your case: | | | | |
|---|---------------------|--------------------------|----------------|---|
| Debtor 1 | Christopher I | David Smith | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court fo | or the: District of Wash | ington Eastern | _ |
| Case number (If known) | | | | |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| Pa | rt 1: List All of Your PRIORITY Unsecure | ed Claims | | | |
|-----|---|--|-------------------------------------|-------------------------------|-----------------------------|
| | Do any creditors have priority unsecured claims ☑ No. Go to Part 2. ☐ Yes. | s against you? | | | |
| 2. | List all of your priority unsecured claims. If a creeach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the control of | editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim particulars for this form in the instructions for this form in the instruction booklet. | at claim here ar ame. If you hav | nd show both e more than t | priority and wo priority |
| | , contains an odd stype of claim, coo are | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| | Number Street | When was the debt incurred? | | | |
| | City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | | |
| 2.2 | Priority Creditor's Name | Last 4 digits of account number When was the debt incurred? | \$ | _ \$ | \$ |
| | Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | | |

| Case number | if known) |
|-------------|-----------|
| | |

| Part 2: | List All of | Your NONPRIORITY | Unsecured | Claims |
|---------|-------------|------------------|-----------|--------|

| | Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes | | |
|-----|--|---|------------------------|
| | List all of your nonpriority unsecured claims in the alphabetical opriority unsecured claim, list the creditor separately for each claim. Fo included in Part 1. If more than one creditor holds a particular claim, lifill out the Continuation Page of Part 2. | r each claim listed, identify what type of claim it is. Do not list | claims already |
| | | | Total claim |
| 1.1 | Chevron/Synchrony Bank | Last 4 digits of account number 9 6 5 1 | _{\$} 879.42 |
| | Nonpriority Creditor's Name PO Box 530950 | When was the debt incurred? | \$ <u></u> |
| | Number Street | | |
| | Atlanta GA 30353-0950 | | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | |
| | _ | Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is the claim subject to offset? | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☑ No | ■ Other. Specify <u>Credit Card Charges</u> | |
| | Yes | | |
| 1.2 | Gesa Credit Union | Last 4 digits of account number _1 _7 _2 _9 | \$ 15,331.09 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | PO Box 660493 | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Dallas TX 75266-0493 City State ZIP Code | _ | |
| | · | Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed☐ | |
| | Debtor 1 only | □ Disputeu | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | that you did not report as priority claims | |
| | Is the claim subject to offset? | □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card Charges | |
| | ☑ No ☐ Yes | Circl. Openly | |
| 1.3 | | | |
| 1.3 | Portfolio Recovery Associates, LLC Nonpriority Creditor's Name | Last 4 digits of account number <u>1</u> <u>5</u> <u>0</u> <u>4</u> | _{\$} 2,514.74 |
| | | When was the debt incurred? | |
| | PO Box 12914 Number Street | | |
| | Norfolk VA 23541 | As of the date you file the claim is Cheek all that each | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. | Contingent | |
| | Debtor 1 only | ☐ Unliquidated ☐ Disputed | |
| | Debtor 2 only | - Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce | |
| | Is the claim subject to offset? | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ☑ No | Other. Specify collection | |
| | Yes | · · · | |

Debtor 1

Christopher David Smith Middle Name Last Name

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims —Continuation Page

| After listing any entries on this page, number them be | eginning with 4.5, followed by 4.6, and so forth. | Total claim |
|---|---|--------------------|
| Synchrony Bank Nonpriority Creditor's Name | Last 4 digits of account number <u>5</u> <u>3</u> <u>5</u> <u>0</u> | \$ <u>2,945.52</u> |
| PO Box 960061 | When was the debt incurred? | |
| Number Street Orlando FL 3289 | As of the date you file, the claim is: Check all that apply. | |
| | P Code Contingent Unliquidated | |
| Who incurred the debt? Check one. | Disputed | |
| ☐ Debtor 1 only ☐ Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another | Student loansObligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| Is the claim subject to offset? | □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card Charges | |
| ☑ No☐ Yes | | |
| Synchrony Bank - JCP | Last 4 digits of account number 7 1 5 1 | \$ <u>1,230.09</u> |
| Nonpriority Creditor's Name PO Box 960090 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | P Code Contingent | |
| Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed | |
| ☐ Debtor 1 only ☐ Debtor 2 only | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? ☑ No ☐ Yes | ☑ Other. Specify Credit Card Charges | |
| .6 | Last 4 digits of account number 8 8 4 9 | \$ 2,454.03 |
| Target Card Services Nonpriority Creditor's Name | Last 4 digits of account number <u>0 0 4 9</u> | |
| PO Box 660170 | When was the debt incurred? | |
| Number Street Dallas TX 7526 | As of the date you file, the claim is: Check all that apply. | |
| City State ZII | P Code Contingent Unliquidated | |
| Who incurred the debt? Check one. | Disputed | |
| ☐ Debtor 1 only ☐ Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | |
| ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? ☑ No ☑ Yes | ☑ Other. Specify Credit Card Charges | |

Debtor 1

Christopher David Smith Middle Name Last Name

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims —Continuation Page

| Afte | er listing any entries on this page, number them beginning with 4 | 1.5, followed by 4.6, and so forth. | Total claim | |
|------|---|---|--------------------|--|
| 4.7 | U.S. Bank | Last 4 digits of account number 1 0 5 8 | \$ <u>1,002.05</u> | |
| | Nonpriority Creditor's Name PO Box 790408 | When was the debt incurred? | | |
| | Number Street St. Louis MO 63179-0408 | As of the date you file, the claim is: Check all that apply. | | |
| | City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Charges | | |
| 4.0 | ☐ Yes | | | |
| 4.8 | Walmart/Synchrony Bank Nonpriority Creditor's Name | Last 4 digits of account number 2 6 1 | \$ <u>2,106.61</u> | |
| | PO Box 530927 | When was the debt incurred? | | |
| | Number Street Atlanta GA 30353-0927 | As of the date you file, the claim is: Check all that apply. | | |
| | City State ZIP Code Who incurred the debt? Check one. | □ Contingent□ Unliquidated□ Disputed | | |
| | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card Charges | | |
| | ☑ No ☐ Yes | | | |
| 4.9 | | Last 4 digits of account number | \$ | |
| | Nonpriority Creditor's Name | When was the debt incurred? | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | |
| | City State ZIP Code | ☐ Contingent ☐ Unliquidated | | |
| | Who incurred the debt? Check one. | ☐ Disputed | | |
| | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | |
| | ☐ Yes | | | |

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|--------------|---|-----|-------------------------|
| Total claims | 6a. Domestic support obligations | 6a. | \$ |
| from Part 1 | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were | 6b. | \$ |
| | | 6c. | \$ |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$ |
| | | | Total claim |
| Total claims | 6f. Student loans | 6f. | \$0.00 |
| from Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ <u>0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ <u>0.00</u> |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | + \$28,463.55 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | _{\$} 28,463.55 |

| Fill in this in | nformation to ide | entify your case: | |
|---------------------------|---------------------|------------------------------|-----------|
| Debtor | Christopher Davi | id Smith Middle Name | Last Name |
| Debtor 2 | | | Last Name |
| (Spouse If filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court fo | r the: District of Washingto | n Eastern |
| Case number (If known) | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease | | | | State what the contract or lease is for | | | | | |
|-----|--|---------------------------|-------|----------|---|--|--|--|--|--|
| 2.1 | Clearwater Name | Square Apartment | S | | apartment lease | | | | | |
| | 5031 W. CI Number | earwater Avenue Street | | | | | | | | |
| | Kennewick | | WA | 99336 | | | | | | |
| | City | | State | ZIP Code | | | | | | |
| 2.2 | | | | | | | | | | |
| | Name | | | | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | | | | | | |
| 2.3 | | | | | | | | | | |
| | Name | | | | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | | | | | | |
| 2.4 | | | | | | | | | | |
| | Name | | | | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | • | | | | | |
| 2.5 | | - | | | | | | | | |
| | Name | | | | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | | | | | | |

| Fill in this information to identify your case: | | | | | | |
|--|------------------------|------------------|-----------|--|--|--|
| Debtor 1 | Christopher David Smit | h Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Washington Eastern | | | | | | |
| Case number (If known) | | | - | | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| 1. | Do you have any cod ☑ No | debtors? (If you are filing a joint case, do n | ot list either spouse as a | codebtor.) |
|-----|-----------------------------|--|----------------------------|--|
| | ☐ Yes | | | |
| 2. | • | ars, have you lived in a community prope daho, Louisiana, Nevada, New Mexico, Pue | • • | Community property states and territories include gton, and Wisconsin.) |
| | ☐ No. Go to line 3. | | | |
| | Yes. Did your spo | ouse, former spouse, or legal equivalent live | e with you at the time? | |
| | ☑ No | | | |
| | ☐ Yes. In which | community state or territory did you live? _ | Fi | Il in the name and current address of that person. |
| | Name of your sp | ouse, former spouse, or legal equivalent | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| _ | In Column 4 list all | of very codebtors. Do not include very | navoa oo o aadabtar if : | very energy is filing with you. List the never |
| Э. | | • | • | your spouse is filing with you. List the person Make sure you have listed the creditor on |
| | • | I Form 106D), <i>Schedule E/F</i> (Official Form | • | • |
| | Schedule E/F, or Sc | chedule G to fill out Column 2. | | |
| | Column 1: Your co | debtor | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| 3.1 | | | | |
| | Name | | | Schedule D, line |
| | | | | ☐ Schedule E/F, line |
| | Number Street | | | Schedule G, line |
| | City | State | ZIP Code | _ |
| 3.2 | | | | D. Ostada B.F. |
| | Name | | | Schedule D, line |
| | Number | | | Schedule E/F, line |
| | Number Street | | | ☐ Schedule G, line |
| | City | State | ZIP Code | _ |
| 3.3 | | | | |
| | Name | | | Schedule D, line |
| | | | | Schedule E/F, line |
| | Number Street | | | ☐ Schedule G, line |
| | City | State | ZIP Code | _ |

| Fill in this information to identify y | our case: | | | | |
|---|---|---|------------------|---|---|
| | | | | | |
| Debtor 1 Christopher David Sm First Name | ith Middle Name | Last Name | | - | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | - | |
| United States Bankruptcy Court for the: _ | District of Washington Eas | stern | | _ | |
| Case number(If known) | | | | Check if the | nis is: |
| (II KIIOWII) | | | | | ended filing |
| | | | | | plement showing post-petition or 13 income as of the following date: |
| Official Form 106I | | | | MM / D | D/ YYYY |
| Schedule I: You | r Income | | | | 12/15 |
| supplying correct information. If you | u are married and not fili se is not filing with you, o top of any additional pag | ing jointly, and you do not include info | ır spo rmatio | use is living with y on about your spo | or 2), both are equally responsible for ou, include information about your spouse. use. If more space is needed, attach a nown). Answer every question. |
| Fill in your employment | | Debtor 1 | | | Debtor 2 or non-filing spouse |
| information. If you have more than one job, | | Deptor 1 | | | Debtor 2 or non-ning spouse |
| attach a separate page with information about additional employers. | Employment status | | ed | | ☐ Employed ☐ Not employed |
| Include part-time, seasonal, or self-employed work. | | driver | | | |
| Occupation may Include student or homemaker, if it applies. | Occupation | anver | | | |
| | Employer's name | Southern Glaze | r | | |
| | Employer's address | 501 N. Quay Number Street | | | Number Street |
| | | | 00226 | | |
| | | Kennewick, WA City | State | | City State ZIP Code |
| | How long employed the | ere? 6 years | | | |
| Part 2: Give Details About | Monthly Income | | | | |
| Estimate monthly income as of spouse unless you are separated | | m. If you have noth | ing to | report for any line, w | rite \$0 in the space. Include your non-filing |
| If you or your non-filing spouse habelow. If you need more space, a | ave more than one employ | | rmatio | on for all employers | for that person on the lines |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$_4,287.83 | \$_0.00 |
| 3. Estimate and list monthly over | time pay. | | 3. | +\$ 38.25 | + \$ 0.00 |
| 4. Calculate gross income. Add li | ne 2 + line 3. | | 4. | \$_4,326.08 | \$_0.00 |

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Case number (if known)_____

| | | For Debtor 1 | | For Debtor 2 or non-filing spouse | | |
|--|-------------|---------------------|-------|-----------------------------------|-----|--------------------|
| Copy line 4 here | → 4. | \$ <u>4,326.08</u> | | \$_0.00 | - | |
| 5. List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ 647.48 | | \$ 0.00 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ 0.00 | _ | \$ 0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ 0.00 | _ | \$ 0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$_0.00 | | \$ 0.00 | | |
| 5e. Insurance | 5e. | \$ 339.26 | | \$ 0.00 | | |
| 5f. Domestic support obligations | 5f. | \$_0.00 | _ | \$ 0.00 | | |
| 5g. Union dues | 5g. | \$ 65.00 | _ | \$ 0.00 | | |
| 5h. Other deductions. Specify: | _ | +\$_0.00 | _ | + \$ 0.00 | | |
| 6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$ <u>1,051.74</u> | _ | \$_0.00 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ <u>3,274.34</u> | _ | \$_0.00 | | |
| 8. List all other income regularly received: | | | | | | |
| 8a. Net income from rental property and from operating a business, | | | | | | |
| profession, or farm Attach a statement for each property and business showing gross | | | | | | |
| receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ <u>0.00</u> | _ | \$_0.00 | | |
| 8b. Interest and dividends | 8b. | \$_0.00 | _ | \$ <u>0.00</u> | | |
| 8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive | ent | | | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$_0.00 | _ | \$_0.00 | - | |
| 8d. Unemployment compensation | 8d. | \$ 0.00 | _ | \$ <u>0.00</u> | | |
| 8e. Social Security | 8e. | \$_0.00 | - | \$ 0.00 | | |
| 8f. Other government assistance that you regularly receive | | | | | | |
| Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | nce | \$_0.00 | _ | \$_0.00 | - | |
| Specify: | 8f. | | | | | |
| 8g. Pension or retirement income | 8g. | \$_0.00 | _ | \$_0.00 | | |
| 8h. Other monthly income. Specify: | 8h. | +\$0.00 | _ | +\$_0.00 | | |
| 9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$_0.00 | _ | \$ 0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ 3,274.34 | + | \$_0.00 | _ = | \$ 3,274.34 |
| 11. State all other regular contributions to the expenses that you list in Schee | dule J | | | | | |
| Include contributions from an unmarried partner, members of your household, friends or relatives. | your d | ependents, your ro | omn | nates, and other | | |
| Do not include any amounts already included in lines 2-10 or amounts that are | not av | vailable to pay exp | ense | s listed in <i>Schedule</i> . | | |
| Specify: | | amazio to pay emp | | | | \$ 0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The | rocult | is the combined n | nonth | | | · |
| Write that amount on the Summary of Your Assets and Liabilities and Certain S | | | | • | 2. | \$ <u>3,274.34</u> |
| · | | | | | | Combined |
| 13. Do you expect an increase or decrease within the year after you file this | form? | | | | | monthly income |
| X Ves Evolain | | | | | | |
| See Attachment 1 | | | | | | |

Attachment Debtor: Christopher David Smith Case No:

Attachment 1

Once the support order is signed, there will be a deduction from my paycheck in the amount of \$700.00 per month for child support. It is now listed on my expense schedule, but will be switched over to deduction from my paycheck once the order is entered.

| Fill in this information to identify your case: | | | | | |
|--|--|----------|--------------------|-------------------------------|--|
| Debtor 1 Christopher David Smith | Check if this | : | | | |
| First Name Middle Name Last Name Debtor 2 | | _ | | | |
| (Spouse, if filing) First Name Middle Name Last Name | An amen | | • | petition chapter 13 | |
| United States Bankruptcy Court for the: District of Washington Eastern | | | the following | - | |
| Case number(If known) | MM / DD / | YYYY | _ | | |
| ` ' | | | | | |
| Official Form 106J | | | | | |
| Schedule J: Your Expenses | | | | 12/15 | |
| Be as complete and accurate as possible. If two married people are fili information. If more space is needed, attach another sheet to this form (if known). Answer every question. | | - | | - | |
| Part 1: Describe Your Household | | | | | |
| 1. Is this a joint case? | | | | | |
| No. Go to line 2. Yes. Does Debtor 2 live in a separate household? | | | | | |
| □ No | | | | | |
| Yes. Debtor 2 must file Official Forms 106J-2, Expenses fo | r Separate Household of Debtor 2. | | | | |
| 2. Do you have dependents? | Daman danskla malaskia malain sa | | Dan an dan da | Dane damandant live | |
| Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent | | | Dependent's age | Does dependent live with you? | |
| Do not state the dependents' | daughter | _1 | 0 | Ŭ No ☐ Yes | |
| names. | daughter | | 3 | ĭ No | |
| | | | <u></u> | ☐ Yes | |
| | | _ | | □ No | |
| | | | | ☐ Yes | |
| | | _ | | ☐ No ☐ Yes | |
| | | | | ☐ No | |
| | | - | | Yes | |
| 3. Do your expenses include | | | | | |
| expenses of people other than yourself and your dependents? | | | | | |
| | | | | | |
| Part 2: Estimate Your Ongoing Monthly Expenses | | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you | = | | - | | |
| expenses as of a date after the bankruptcy is filed. If this is a suppler applicable date. | nental <i>Schedule J</i> , check the box | at the t | top of the forn | and fill in the | |
| Include expenses paid for with non-cash government assistance if yo | ou know the value of | | | | |
| such assistance and have included it on Schedule I: Your Income (Of | | | Your expe | nses | |
| The rental or home ownership expenses for your residence. Include any rent for the ground or lot. | le first mortgage payments and | 4. | \$ <u>900.00</u> | | |
| If not included in line 4: | | | | | |
| 4a. Real estate taxes | | 4a. | \$ <u>0.00</u> | | |
| 4b. Property, homeowner's, or renter's insurance | | 4b. | \$ 30.42 | | |
| 4c. Home maintenance, repair, and upkeep expenses | | 4c. | \$ 50.00 | | |
| 4d. Homeowner's association or condominium dues | | 4d. | \$ 0.00 | | |

Official Form 106J

Last Name

Case number (if known)_

| | | | Your expenses |
|-----|---|------|------------------|
| E | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ 0.00 |
| Э. | Additional mortgage payments for your residence, such as nome equity loans | 5. | |
| 6. | | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ 50.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ 25.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ <u>200.00</u> |
| | 6d. Other. Specify: | 6d. | \$_0.00 |
| 7. | Food and housekeeping supplies | 7. | \$ <u>500.00</u> |
| 8. | Childcare and children's education costs | 8. | \$ 0.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ <u>100.00</u> |
| 10. | Personal care products and services | 10. | \$ <u>50.00</u> |
| 11. | Medical and dental expenses | 11. | \$ <u>150.00</u> |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ <u>275.00</u> |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$_50.00 |
| 14. | Charitable contributions and religious donations | 14. | \$_0.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ 0.00 |
| | 15b. Health insurance | 15b. | \$_0.00 |
| | 15c. Vehicle insurance | 15c. | \$ 84.52 |
| | 15d. Other insurance. Specify: | 15d. | \$_0.00 |
| 6. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$_0.00 |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$_400.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ 0.00 |
| | 17c. Other. Specify: pop up trailer | 17c. | \$ <u>50.00</u> |
| | 17d. Other. Specify: Dell computer | 17d. | \$ <u>40.00</u> |
| 8 | Your payments of alimony, maintenance, and support that you did not report as deducted from | | See Attachment 1 |
| | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$_700.00 |
| 19. | Other payments you make to support others who do not live with you. | | |
| | Specify: child support for daughters | 19. | \$ <u>0.00</u> |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ıe. | |
| | 20a. Mortgages on other property | 20a. | \$_0.00 |
| | 20b. Real estate taxes | 20b. | \$_0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$_0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$_0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ 0.00 |

Official Form 106J

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| Debtor 1 | Christopher David Smith First Name Middle Name Last Name | Case number (if known) | |
|---------------|--|------------------------|----------------------------------|
| 21. Ot | ner. Specify: | 21. | +\$_0.00 |
| 22 22 | Iculate your monthly expenses. a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 b. Add line 22a and 22b. The result is your monthly expenses. | 22. | \$ 3,729.94 \$ \$ 3,729.94 |
| 23. Cal | culate your monthly net income. | | |
| 23a | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ <u>3,274.34</u> |
| 23b. | Copy your monthly expenses from line 22 above. | 23b. | - \$3,729.94 |
| 23c. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ <u>-455.60</u> |
| | you expect an increase or decrease in your expenses within the year after you | | |
| | example, do you expect to finish paying for your car loan within the year or do you tgage payment to increase or decrease because of a modification to the terms of you | | |

Official Form 106J

☐ No. ☐ Yes.

Explain here:

Attachment Debtor: Christopher David Smith Case No:

Attachment 1

Type of Installment or Lease: Les Schwab Tires

Amount: \$75.00

| Fill in this in | nformation to identify | your case: | |
|---------------------------------|---------------------------|----------------------|--------------------|
| Debtor 1 | Christopher First Name | David Middle Name | Smith Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for the: | District of Was | hington Eastern |
| Case number | (If known) | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | Your assets Value of what you own |
|--|-----------------------------------|
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ <u>29,475.61</u> |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ <u>29,475.61</u> |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ <u>37,813.75</u> |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ 0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ 28,463.55 |
| Your total liabilities | \$ <u>66,277.30</u> |
| Part 3: Summarize Your Income and Expenses | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ <u>3,274.34</u> |
| 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$ 3,729.94 |

Official Form 106Sum

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| Debtor 1 | Christopher | David | Smith | Case number (if known) |
|----------|-------------|------------------|-----------|------------------------|
| | First Name | MC Lillia Manana | Leat Mana | |

| P | art 4: Answer These Questions for Administrative and Statistical Records | | |
|----|---|----------------------------------|--------------------|
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | ☐ No. You have nothing to report on this part of the form. Check this box and submit this fo ☐ Yes | orm to the court with your other | r schedules. |
| 7. | What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purpose. | | onal, |
| | Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules. | of the form. Check this box ar | nd submit |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | come from Official | \$ <u>4,326.08</u> |
| 9. | Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : | | |
| | | Total claim | |
| | From Part 4 on Schedule E/F, copy the following: | | |
| | 9a. Domestic support obligations (Copy line 6a.) | <u>\$0.00</u> | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ <u>0.00</u> | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | <u>\$0.00</u> | |
| | 9d. Student loans. (Copy line 6f.) | \$0.00 | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | <u>\$0.00</u> | |
| | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$0.00 | |
| | 9g. Total. Add lines 9a through 9f. | \$_0.00 | |

| Fill in this in | formation to identify y | our case: | |
|---------------------------------|-----------------------------|-----------------|-----------------|
| Debtor 1 | Christopher David Smitl | Niddle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for the: _ | District Of Was | hington Eastern |
| Case number (If known) | | | _ |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| No | |
|--|--|
| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
| | Signature (Official Form 119). |
| | |
| | |
| | |
| | |
| der nenalty of neriury. I declare that I have read | the summary and schedules filed with this declaration and |
| der penalty of perjury, I declare that I have read t they are true and correct. | the summary and schedules filed with this declaration and |
| | the summary and schedules filed with this declaration and |
| | the summary and schedules filed with this declaration and |
| | the summary and schedules filed with this declaration and |

| Fill in this in | nformation to identify | your case: | |
|---------------------------------|---------------------------|------------------------|--------------------|
| Debtor 1 | Christopher First Name | David Middle Name | Smith Last Name |
| Debtor 2 (Spouse, if filing) |) First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for the: | District of Washington | Eastern |
| Case number (If known) | | | _ |

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1 | Give Details About Your Marital | Status and Where Yo | ou Lived Before | |
|---------------------|---|-----------------------------|---|-------------------------------|
| | it is your current marital status? Married Not married | | | |
| X | ng the last 3 years, have you lived anywh No Yes. List all of the places you lived in the las | | | |
| | Debtor 1: | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| | Number Street | From To | Same as Debtor 1 Number Street | Same as Debtor 1 From To |
| | City State ZIP Code | | City State ZIP Code | |
| | Number Street | From To | Same as Debtor 1 Number Street | Same as Debtor 1 From To |
| 3. With and ⊠ | territories include Arizona, California, Idaho | a spouse or legal equiv | City State ZIP Code valent in a community property state or territory? (Community Property State or territory) valent in a community property State or territory? | Community property states |
| | No Yes. Make sure you fill out <i>Schedule H: You</i> | ur Codebtors (Official Form | m 106H). | |

Official Form 107

Last Name

| Part 2: | Explain | the | Sources | of | Your | Income |
|---------|---------|-----|---------|----|------|--------|
| | -xp.a | | | • | | |

| ☐ No ☑ Yes. Fill in the details. | | | | |
|--|--|--|--|--|
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$_0.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| For last calendar year: (January 1 to December 31, 2017 YYYY | Wages, commissions, bonuses, tipsOperating a business | \$93,892.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| For the calendar year before that: (January 1 to December 31, 2016 YYYY YYYY | Wages, commissions, bonuses, tipsOperating a business | \$ <u>52,577.29</u> | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| nclude income regardless of whether that income and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from e | ome is taxable. Examples rental income; interest; div have income that you recome | of other income are aliminated as a simple of other income are a simple of other income are aliminated as a simple of other income are aliminated as a simple of other income are a simple of other income are a | d from lawsuits; royalties; ar once under Debtor 1. | |
| nclude income regardless of whether that income and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from e | ome is taxable. Examples rental income; interest; div have income that you recome | of other income are aliminated as a simple of other income are a simple of other income are aliminated as a simple of other income are aliminated as a simple of other income are a simple of other income are a | d from lawsuits; royalties; ar once under Debtor 1. | |
| actude income regardless of whether that income of other public benefit payments; pensions; innings. If you are filing a joint case and you ist each source and the gross income from e | ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do | of other income are aliminated as a simple of other income are a simple of other income are aliminated as a simple of other income are aliminated as a simple of other income are a simple of other income are a | d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. | Gross income from each source |
| clude income regardless of whether that income of other public benefit payments; pensions; innings. If you are filing a joint case and you st each source and the gross income from e No Yes. Fill in the details. | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimited and side of other income are alimited as a side of other income and income that on the income include income that one of the income in | d from lawsuits; royalties; are conce under Debtor 1. t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and |
| clude income regardless of whether that income dother public benefit payments; pensions; innings. If you are filing a joint case and you st each source and the gross income from e | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimited and side of other income are alimited as a side of other income and income that on the income include income that one of the income in | d from lawsuits; royalties; are conce under Debtor 1. t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and |
| clude income regardless of whether that income of other public benefit payments; pensions; innings. If you are filing a joint case and you st each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimited and side of other income are alimited as a side of other income and income that on the income include income that one of the income in | d from lawsuits; royalties; are conce under Debtor 1. t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and |
| clude income regardless of whether that income do ther public benefit payments; pensions; innings. If you are filing a joint case and you st each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimitidends; money collected elived together, list it only to not include income that Gross income from each source (before deductions and exclusions) \$ | d from lawsuits; royalties; ar v once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| clude income regardless of whether that income of other public benefit payments; pensions; innings. If you are filing a joint case and you st each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimitidends; money collected elived together, list it only a not include income that a continuous form of the continuous forms of | d from lawsuits; royalties; ar v once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| clude income regardless of whether that income of other public benefit payments; pensions; innings. If you are filing a joint case and you st each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimitidends; money collected elived together, list it only to not include income that to not include income are alimitiated. | d from lawsuits; royalties; ar v once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| reclude income regardless of whether that income of the public benefit payments; pensions; irinnings. If you are filing a joint case and you ist each source and the gross income from each source and the gross income from each source. I No I Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,) | ome is taxable. Examples rental income; interest; div have income that you record ach source separately. Do Debtor 1 Sources of income | of other income are alimitidends; money collected elived together, list it only to not include income that to not include income are alimitiated. | d from lawsuits; royalties; ar v once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| Include income regardless of whether that income and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from each of the gross income from each of the source and the gross income from each of the gro | pome is taxable. Examples rental income; interest; diversity have income that you reconstructed as a source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimitidends; money collected elived together, list it only to not include income that to not include income are alimitiated. | d from lawsuits; royalties; ar v once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,) | pome is taxable. Examples rental income; interest; diversity have income that you reconstructed as a source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimitidends; money collected elived together, list it only a not include income that a continuous form of the continuous forms of | d from lawsuits; royalties; ar v once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) - \$ |

First Name Middle Name

| | |
|------|-----|
| Last | Nam |

| art 3: | List Certain | Payments You | u Made Befoi | re You Filed | for Bankruptcy | | |
|--------------|--|----------------------|-------------------|------------------|--|--|-----------------------|
| A:41 | han Dahtan 4'a | an Dahtan Ola dal | | | 4-2 | | |
| _ | | or Debtor 2's del | | | | | |
| □ No. | | | | | ebts. Consumer debts a nousehold purpose." | re defined in 11 U.S.C. § 101 | (8) as |
| | During the 90 | days before you | filed for bankru | ptcy, did you p | ay any creditor a total o | f \$6,425* or more? | |
| | ☐ No. Go to | line 7. | | | | | |
| | total | amount you paid | that creditor. De | o not include p | | or more payments and the upport obligations, such as this bankruptcy case. | |
| | * Subject to a | djustment on 4/01 | /19 and every 3 | 3 years after th | at for cases filed on or a | after the date of adjustment. | |
| Yes | s. Debtor 1 or D | Debtor 2 or both I | have primarily | consumer de | bts. | | |
| | | | | | ay any creditor a total of | f \$600 or more? | |
| | ☑ No. Go to | | | • | | | |
| | credi | itor. Do not include | e payments for | domestic supp | \$600 or more and the to port obligations, such as ey for this bankruptcy ca | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for. |
| | | | | | \$ | \$ | ☐ Mortgage |
| | Creditor's N | √ame | | | | | ☐ Car |
| | Number | Street | | | | | ☐ Credit card |
| | Number | Officer | | | | | Loan repayment |
| | | | | | | | ☐ Suppliers or vendor |
| | City | State | ZIP Code | | | | ☐ Other |
| | —————————————————————————————————————— | Otale | Zii Gode | - | | | |
| | | | | | \$ | \$ | ☐ Mortgage |
| | Creditor's N | ıame | | | | | ☐ Car |
| | Number | Street | | | | | ☐ Credit card |
| | | | | | | | Loan repayment |
| | | | | | | | ☐ Suppliers or vendor |
| | City | State | ZIP Code | | | | ☐ Other |
| | | | | - | | | |
| | Creditor's N | Name | | | \$ | \$ | ☐ Mortgage |
| | | | | | | | Car |
| | Number | Street | | | | | Credit card |
| | | | | | | | Loan repayment |
| | | | | | | | Suppliers or vendo |
| | City | State | ZIP Code | | | | ☐ Other |

| nsiders include your rela orporations of which you | a business you operate as a | relatives of any g son in control, or | general partners; pa owner of 20% or n | artnerships of which nore of their voting | |
|--|---|--|--|--|---|
| Yes. List all payments | s to an insider. | | | | |
| | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | \$ | \$ | |
| Insider's Name | | | | | |
| Number Street | | | | | |
| | | | | | |
| City | State ZIP Code | - | | | |
| | | | \$ | \$ | |
| Insider's Name | | | 4 | · · | |
| Number Street | | | | | |
| | | | | | |
| | | | | | |
| City | State ZIP Code | | | | |
| | | ou make any p | ayments or transfo | er any property on | account of a debt that benefited |
| /ithin 1 year before you n insider? | | | ayments or transfo | er any property on | account of a debt that benefited |
| /ithin 1 year before you n insider? | ı filed for bankruptcy, did y | | ayments or transfo | er any property on | account of a debt that benefited |
| fithin 1 year before you n insider? nclude payments on deb | ı filed for bankruptcy, did y | y an insider. | | | |
| fithin 1 year before you n insider? nclude payments on deb | u filed for bankruptcy, did y | | ayments or transfo Total amount paid | er any property on Amount you still owe | account of a debt that benefited Reason for this payment Include creditor's name |
| fithin 1 year before you n insider? Include payments on deb INo Yes. List all payments | u filed for bankruptcy, did y | y an insider. Dates of | Total amount | Amount you still | Reason for this payment |
| fithin 1 year before you n insider? nclude payments on deb | u filed for bankruptcy, did y | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| fithin 1 year before you n insider? Include payments on deb INo Yes. List all payments | u filed for bankruptcy, did y | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| fithin 1 year before you n insider? nclude payments on deb No Yes. List all payments | u filed for bankruptcy, did y | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| fithin 1 year before you n insider? nclude payments on deb No Yes. List all payments | u filed for bankruptcy, did y | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| fithin 1 year before you n insider? Include payments on deb No Yes. List all payments Insider's Name Number Street | u filed for bankruptcy, did yots guaranteed or cosigned be that benefited an insider. | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |

City

ZIP Code

State

| Part 4: | Identify Leg | al Actions | Repossessions, | and | Foreclosures |
|---------|--------------|------------|----------------|-----|--------------|
| | | , , | ,, | | |

Last Name

| Vithin 1 year before you filed for ba ist all such matters, including persona and contract disputes. | al injury cases, s | | | | | | |
|--|--------------------|---|--|---|---------|----------|--|
| No No | | | | | | | |
| Yes. Fill in the details. | | | | | | | |
| | Nature | e of the case | | Court or agenc | у | | Status of the case |
| | | | | | | | |
| Case title | | | | Court Name | | | — Pending |
| | | | | | | | On appeal |
| | | | | Number Street | | | Concluded |
| Case number | | | | | | | |
| | | | | City | State | ZIP Code | |
| | | | | | | | D. Daniellan |
| Case title | | | | Court Name | | | Pending |
| | | | | | | | On appeal |
| | | | | Number Street | | | Concluded |
| Case number | | | | 0.14 | 01-1- | 710.0-1- | |
| | | | | City | State | ZIP Code | |
| No. Go to line 11. | ils below. | Describe th | | | ou, gam | Date | ed, seized, or levied? Value of the property |
| No. Go to line 11. Yes. Fill in the information below. | ils below. | Describe th | | | , ga | | |
| No. Go to line 11. | ils below. | Describe th | | | | | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. | ils below. | - | | | , ga | | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name | ils below. | Explain wha | e property | | , ga | | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name | ils below. | Explain wha | e property at happened rty was reposs rty was foreclo | sessed. | , ga | | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | | Explain who | e property at happened rty was reposs rty was forecle rty was garnis | sessed. osed. hed. | | | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name | | Explain what Prope Prope Prope | e property at happened rty was reposs rty was foreclo rty was garnis rty was attach | sessed. | | Date | Value of the property \$ |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | | Explain who | e property at happened rty was reposs rty was foreclo rty was garnis rty was attach | sessed. osed. hed. | | | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | | Explain what Prope Prope Prope | e property at happened rty was reposs rty was foreclo rty was garnis rty was attach | sessed. osed. hed. | | Date | Value of the property \$ Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | | Explain what Prope Prope Prope | e property at happened rty was reposs rty was foreclo rty was garnis rty was attach | sessed. osed. hed. | | Date | Value of the property \$ |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State | | Explain what Prope Prope Prope Prope Describe th | e property at happened rty was reposs rty was foreclo rty was garnis rty was attach | sessed. osed. hed. | | Date | Value of the property \$ Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name City State Creditor's Name | | Explain what Prope Prope Prope Prope Describe the | e property at happened rty was reposs rty was forecle rty was garnis rty was attach e property | sessed. osed. hed. ed, seized, or lev | | Date | Value of the property \$ Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name City State Creditor's Name | | Explain what Prope Prope Prope Explain what Prope | e property at happened rty was reposs rty was forecle rty was garnis rty was attach e property | sessed. osed. hed. ed, seized, or lev | | Date | Value of the property \$ Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Creditor's Name City State Creditor's Name | e ZIP Code | Explain what Prope Prope Prope Prope Explain what Prope Prope | at happened arty was reposs arty was forecle arty was garnis arty was attach arty was attach arty was attach arty was reposs | sessed. osed. hed. ed, seized, or leventessessed. osed. | | Date | Value of the property \$ Value of the property |

| Inristopher | David Smith | |
|-------------|-------------|-----------|
| st Name | Middle Name | Last Name |

| No | | | |
|--|---|-----------------------------|-------------|
| Yes. Fill in the details. | | | |
| | Describe the action the creditor took | Date action | Amount |
| Creditor's Name | | was taken | |
| Creditor's Name | | | |
| Number Street | | | \$ |
| | | | |
| | | | |
| City State ZIP Code | Last 4 digits of account number: XXXX | | |
| | | | |
| | cy, was any of your property in the possession of an assign | nee for the benefit | of |
| ditors, a court-appointed receiver, a cu | stodian, or another official? | | |
| No | | | |
| Yes | | | |
| List Certain Gifts and Contribu | 4iaua | | |
| List Certain Gifts and Contribu | tions | | |
| | | | |
| in 2 years before you filed for bankrup | tcy, did you give any gifts with a total value of more than \$6 | 600 per person? | |
| No | | | |
| Yes. Fill in the details for each gift. | | | |
| | | | |
| Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| per person | | the girts | |
| | | | |
| | | | |
| Person to Whom You Gave the Gift | | | \$ |
| Person to Whom You Gave the Gift | | | \$ |
| | | | \$ \$ |
| Person to Whom You Gave the Gift Number Street | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| Number Street City State ZIP Code | | | \$ \$ |
| Number Street | | | \$ \$ |
| Number Street City State ZIP Code Person's relationship to you | Describe the gifts | Dates you gave | |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave the gifts | \$ |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | Describe the gifts | | |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | | |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | | |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | | Value \$ |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | Value \$ |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | Value \$ |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | Value \$ |
| Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | Value \$ |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Email or website address

Person Who Made the Payment, if Not You

| Christopher I | David Smith | | Case number (if known) |
|---------------|-------------|-----------|------------------------|
| First Name | Middle Name | Last Name | |

| | Description and value of any property | transferred | Date payment or transfer was made | Amount of payment |
|--|---|---|-----------------------------------|-------------------|
| Person Who Was Paid | | | | \$ |
| Number Street | | | | \$ |
| City State ZIP Code | | | | |
| Email or website address | _ | | | |
| Person Who Made the Payment, if Not You | | | | |
| Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y No Yes. Fill in the details. | ors or to make payments to your cre | | or any property to | anyone who |
| Yes. Fill in the details. | Description and value of any property | transferred | Date payment or transfer was made | Amount of payme |
| Person Who Was Paid | | | | \$ |
| Number Street | | | | \$ |
| City State ZIP Code Within 2 years before you filed for bankrup transferred in the ordinary course of your | business or financial affairs? | | | property |
| Do not include gifts and transfers that you ha No | | - · · · · · · · · · · · · · · · · · · · | | erty). |
| Include both outright transfers and transfers r Do not include gifts and transfers that you ha No Yes. Fill in the details. | ve already listed on this statement. | | | |
| Do not include gifts and transfers that you ha No | | Describe any property or debts paid in exchan | | |
| Do not include gifts and transfers that you ha No | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfer |
| Do not include gifts and transfers that you ha ☑ No ☐ Yes. Fill in the details. | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfe |
| Do not include gifts and transfers that you ha INO INO INDICATE | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfer |
| Do not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfe |
| Do not include gifts and transfers that you ha X No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfe |
| Do not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfer |
| Do not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you | ve already listed on this statement. Description and value of property | Describe any property of | | Date transfe |

| | thin 10 years before you filed for bankrup | | to a self-settled trus | t or similar device of wh | ich you |
|--------|--|-------------------------------------|---|--|---|
| X | e a beneficiary? (These are often called ass No Yes. Fill in the details. | set-protection devices.) | | | |
| _ | res. i ili ili ule detalis. | Description and value of the proper | ty transferred | | Date transfer was made |
| | Name of trust | | | | was illaue |
| Part | 8: List Certain Financial Accounts, | Instruments Safe Denosit B | loves and Storage | Ilnite | |
| 20. Wi | ithin 1 year before you filed for bankruptcy osed, sold, moved, or transferred? clude checking, savings, money market, o okerage houses, pension funds, cooperat No Yes. Fill in the details. | y, were any financial accounts or | instruments held in y | our name, or for your b | |
| | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Name of Financial Institution Number Street City State ZIP Code | xxxx | ☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other | | \$ |
| | Name of Financial Institution | xxxx | ☐ Checking ☐ Savings | | \$ |
| | Number Street | | ☐ Money market ☐ Brokerage ☐ Other | | |
| se | O you now have, or did you have within 1 yourities, cash, or other valuables? No Yes. Fill in the details. | rear before you filed for bankrupt | cy, any safe deposit b | oox or other depository t | for |
| _ | | Who else had access to it? | Describe th | ne contents | Do you still have it? |
| | Name of Financial Institution | Name | | | ☐ No☐ Yes |
| | Number Street | Number Street | | | |
| | City State ZIP Code | City State ZIP Code | | | |

City

Number Street

State

ZIP Code

Statement of Financial Affairs for Individuals Filing for Bankruptcy

ZIP Code

Number

City

Street

| Christopher [| David Smith | | Case number (if known) |
|---------------|-------------|-----------|------------------------|
| First Name | Middle Name | Last Name | |

| No | | | |
|--|---|---|--|
| Yes. Fill in the details. | | | |
| a res. rill ill the details. | Governmental unit | Environmental law, if you know it | Date of notice |
| | Governmental unit | Environmentariaw, ii you know it | Date of flotice |
| | | | |
| Name of site | Governmental unit | _ | |
| Name to Const | | _ | |
| Number Street | Number Street | | |
| | | _ | |
| | City State ZIP Code | | |
| City State ZIP Code | le | | |
| | | | |
| | r administrative proceeding under a | ny environmental law? Include settlement | s and orders. |
| No | | | |
| Yes. Fill in the details. | | | Status of the |
| | Court or agency | Nature of the case | case |
| Case title | | | |
| | Court Name | | Pending |
| | | | On appea |
| | Number Street | | ☐ Conclude |
| | | | |
| | | | |
| | City State ZIP C Business or Connections to Any kruptcy, did you own a business or I | | any business? |
| Give Details About Your I (ithin 4 years before you filed for bank A sole proprietor or self-employ | Business or Connections to Any | y Business nave any of the following connections to a ctivity, either full-time or part-time | any business? |
| Give Details About Your I fithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of | Business or Connections to Any kruptcy, did you own a business or h yed in a trade, profession, or other a company (LLC) or limited liability par | y Business nave any of the following connections to a ctivity, either full-time or part-time | nny business? |
| Give Details About Your I (ithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing | Business or Connections to Any kruptcy, did you own a business or h yed in a trade, profession, or other a company (LLC) or limited liability par | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) | any business? |
| Give Details About Your II (ithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the v | Business or Connections to Any kruptcy, did you own a business or leved in a trade, profession, or other a company (LLC) or limited liability party g executive of a corporation roting or equity securities of a corporation | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) | any business? |
| Give Details About Your II (Ithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to | Business or Connections to Any kruptcy, did you own a business or leads in a trade, profession, or other a company (LLC) or limited liability paragrees greatly a corporation roting or equity securities of a corporation to Part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) | nny business? |
| Give Details About Your II (Ithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to | Business or Connections to Any kruptcy, did you own a business or leved in a trade, profession, or other a company (LLC) or limited liability party g executive of a corporation roting or equity securities of a corporation | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) pration | |
| Give Details About Your II (Ithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to | Business or Connections to Any kruptcy, did you own a business or byed in a trade, profession, or other a company (LLC) or limited liability paragrees greatly a corporation roting or equity securities of a corporatio Part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. Employer Identificatio | |
| Give Details About Your II If thin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and | Business or Connections to Any kruptcy, did you own a business or byed in a trade, profession, or other a company (LLC) or limited liability paragrees greatly a corporation roting or equity securities of a corporatio Part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. Employer Identificatio Do not include Social | n number Security number or ITIN. |
| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and Business Name | Business or Connections to Any kruptcy, did you own a business or byed in a trade, profession, or other a company (LLC) or limited liability paragrees greatly a corporation roting or equity securities of a corporatio Part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. Employer Identificatio Do not include Social | n number |
| Give Details About Your II If thin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and | Business or Connections to Any kruptcy, did you own a business or byed in a trade, profession, or other a company (LLC) or limited liability paragrees greatly a corporation roting or equity securities of a corporatio Part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. ess | n number Security number or ITIN. |
| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and Business Name | Business or Connections to Any kruptcy, did you own a business or layed in a trade, profession, or other a company (LLC) or limited liability paragraph of a corporation voting or equity securities of a corporation to Part 12. In the details below for each business of the business of the profession of the business of the part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. ess | n number Security number or ITIN. |
| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and Business Name | Business or Connections to Any kruptcy, did you own a business or layed in a trade, profession, or other a company (LLC) or limited liability paragraph of a corporation voting or equity securities of a corporation to Part 12. In the details below for each business of the business of the profession of the business of the part 12. | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. ess | n number Security number or ITIN. |
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| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the v No. None of the above applies. Go to Yes. Check all that apply above and Business Name | Business or Connections to Any kruptcy, did you own a business or I yed in a trade, profession, or other a company (LLC) or limited liability par g executive of a corporation voting or equity securities of a corporation and fill in the details below for each but Describe the nature of the business. Name of accountant or bookkeep | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. Employer Identification Do not include Social EIN: Der Dates business existe From To ess Employer Identification | n number Security number or ITIN. d D n number |
| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the v No. None of the above applies. Go to Yes. Check all that apply above and Business Name | kruptcy, did you own a business or layed in a trade, profession, or other a company (LLC) or limited liability paragraph gexecutive of a corporation voting or equity securities of a corporation for Part 12. In the details below for each business of a corporation of the business of a corporation | r Business nave any of the following connections to a ctivity, either full-time or part-time thership (LLP) pration siness. Employer Identification Do not include Social EIN: Der Dates business existe From To ess Employer Identification | n number Security number or ITIN. |
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| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the v No. None of the above applies. Go to Yes. Check all that apply above and Business Name Number Street | Business or Connections to Any kruptcy, did you own a business or I yed in a trade, profession, or other a company (LLC) or limited liability particles of a corporation voting or equity securities of a corporation of the Part 12. If fill in the details below for each but the Describe the nature of the business. Name of accountant or bookkeep the Describe the nature of the business. | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) pration siness. Employer Identification Do not include Social EIN: From To ess Employer Identification Do not include Social EIN: Employer Identification Do not include Social EIN: Employer Identification Do not include Social EIN: | n number Security number or ITIN. d D n number Security number or ITIN. |
| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume of the above applies. Go to the self-employ above and the self-employ above abov | kruptcy, did you own a business or layed in a trade, profession, or other a company (LLC) or limited liability paragraph gexecutive of a corporation voting or equity securities of a corporation for Part 12. In the details below for each business of a corporation of the business of a corporation | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) pration siness. Employer Identification Do not include Social EIN: From To ess Employer Identification Do not include Social EIN: Employer Identification Do not include Social EIN: Employer Identification Do not include Social EIN: | n number Security number or ITIN. d D n number Security number or ITIN. |
| Give Details About Your II Ifithin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume of the above applies. Go to the self-employ above and the self-employ above abov | Business or Connections to Any kruptcy, did you own a business or I yed in a trade, profession, or other a company (LLC) or limited liability particles of a corporation voting or equity securities of a corporation of the Part 12. If fill in the details below for each but the Describe the nature of the business. Name of accountant or bookkeep the Describe the nature of the business. | r Business nave any of the following connections to a ctivity, either full-time or part-time tnership (LLP) pration siness. Employer Identification Do not include Social EIN: From To ess Employer Identification Do not include Social EIN: Employer Identification Do not include Social EIN: Employer Identification Do not include Social EIN: | n number Security number or ITIN. d D n number Security number or ITIN. |

| n - | | |
|------------|------|---|
| ı ie | htor | 1 |

| Christopher David Smith | | | Case number (if known) |
|-------------------------|-------------|-----------|------------------------|
| First Name | Middle Name | Last Name | |

| | | Describe the nature of the | ne business | Employer Identification number Do not include Social Security number or ITIN. |
|-------------|--|-----------------------------|---------------------------------|---|
| | Business Name | | | EIN: |
| | Number Street | Name of accountant or I | pookkeeper | Dates business existed |
| | | | | From To |
| | City State ZIP Code | | | 10 |
| | in 2 years before you filed for bankrup tutions, creditors, or other parties. | otcy, did you give a financ | ial statement to anyone abo | out your business? Include all financial |
| | lo 'es. Fill in the details below. | | | |
| | | Date issued | | |
| | Name | MM / DD / YYYY | | |
| | Number Street | | | |
| | | | | |
| | City State ZIP Code | | | |
| | | | | |
| Part 12 | Sign Below | | | |
| ans in c | | nd that making a false sta | tement, concealing propert | clare under penalty of perjury that the y, or obtaining money or property by fraud up to 20 years, or both. |
| 4.0 | | 40 | | |
| × | 79/ Christopher David Shitti | × | | |
| | Signature of Debtor 1 | Signat | ure of Debtor 2 | |
| | Date 9 May 2018 | Date _ | | |
| Did | you attach additional pages to Your | Statement of Financial Af | fairs for Individuals Filing fo | or Bankruptcy (Official Form 107)? |
| | No Yes | | | |
| | you pay or agree to pay someone wh | o is not an attorney to he | lp you fill out bankruptcy fo | rms? |
| | | | A441- | the Pankruntov Polition Pranara's Nation |
| | Yes. Name of person | | | the Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119). |
| | | | | |

| Fill in this information to identify your case: | | | |
|---|--------------------|------------------------|--------------------|
| Debtor 1 | Christopher Dav | vid Smith Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court f | for the: District Of V | Vashington Eastern |
| Case number (If known) | | | |

Statement of Intention for Individuals Filing Under Chapter 7

12/15

☐ Check if this is an amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below. | | | | |
|---|--|---|--|--|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the propert as exempt on Schedule C | | |
| Creditor's name: Gesa Credit Union | ☐ Surrender the property. | X No | | |
| idino. | Retain the property and redeem it. | ☐ Yes | | |
| Description of property securing debt: 2010 Flagstaff 176 limited pop up trailer | Retain the property and enter into a Reaffirmation Agreement. | | | |
| Southing door. 2010 Flagoran 170 milited pop up trailer | Retain the property and [explain]: | | | |
| Creditor's | Surrender the property. | ☑ No | | |
| name: Numerica Credit Union | Retain the property and redeem it. | ☐ Yes | | |
| Description of property securing debt: 2017 Jean Charakas with 12000 miles | Retain the property and enter into a Reaffirmation Agreement. | | | |
| securing debt: 2017 Jeep Cherokee with 12000 miles. | ☐ Retain the property and [explain]: | | | |
| Creditor's | ☐ Surrender the property. | ⊠ No | | |
| name: Les Schwab Tires | Retain the property and redeem it. | ☐ Yes | | |
| Description of property securing debt: tires | Retain the property and enter into a Reaffirmation Agreement. | | | |
| 3 · · · · · · · · · · · · · · · · · · · | ☐ Retain the property and [explain]: | | | |
| Creditor's | ☐ Surrender the property. | ☐ No | | |
| name: | Retain the property and redeem it. | ☐ Yes | | |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | | | |
| recumina dept. | | | | |

Your name

| Christopher David Smith | | | Case number (If known) |
|-------------------------|-------------|-----------|---|
| First Name | Middle Name | Last Name | , |

| r any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | | | | |
|---|---------------------------------|----------|--|--|
| escribe your une | expired personal property lease | S | Will the lease be assumed? | |
| ssor's name: | Clearwater Square Apartments | | ⊠ No | |
| scription of leas perty: apartmer | ed | | ☐ Yes | |
| ssor's name: | | | □ No | |
| scription of leas | ed | | ☐ Yes | |
| ssor's name: | | | □ No | |
| scription of leas perty: | ed | | ☐ Yes | |
| ssor's name: | | | □ No | |
| scription of leas | ed | | Yes | |
| ssor's name: | | | □ No | |
| scription of leas | ed | | ☐ Yes | |
| ssor's name: | | | □ No | |
| scription of leas | ed | | ☐ Yes | |
| ssor's name: | | | □ No | |
| scription of leas | ed | | ☐ Yes | |
| | | | roperty of my estate that secures a debt and any | |
| | | v | | |
| | that is subject to an unexpired | | roperty of my estate that s | |

Official Form 108 18-01321-FLK7

Date 05/09/2018 MM / DD / YYYY

Date MM / DD / YYYY

| Fill in this information to identify your case: | | Check one box o | nly as directed in this form and in |
|---|--|--|--|
| Debtor 1 Christopher David Smith First Name Middle Name Last N | ame | | |
| Debtor 2 | | | presumption of abuse. |
| (Spouse, if filing) First Name Middle Name Last N United States Bankruptcy Court for the: DISTRICT OF WASHINGTO | | abuse applie | ion to determine if a presumption of es will be made under <i>Chapter 7</i> <i>Calculation</i> (Official Form 122A–2). |
| Case number(If known) | | | Test does not apply now because of itary service but it could apply later. |
| | | ☐ Check if this | is an amended filing |
| Official Form 122A—1 | | | |
| Chapter 7 Statement of Your Cu | rrent Montl | hly Income | 12/15 |
| Be as complete and accurate as possible. If two married people a space is needed, attach a separate sheet to this form. Include the additional pages, write your name and case number (if known). If do not have primarily consumer debts or because of qualifying manual Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form | e line number to which you believe that you nilitary service, compl | n the additional informate exempted from a | mation applies. On the top of any presumption of abuse because you |
| What is your marital and filing status? Check one only. | | | _ |
| ☑ Not married. Fill out Column A, lines 2-11. ☑ Married and your spouse is filing with you. Fill out both C | olumns A and B, lines 2 | 2-11. | |
| ☐ Married and your spouse is NOT filing with you. You and | l your spouse are: | | |
| ☐ Living in the same household and are not legally se | parated. Fill out both C | columns A and B, lines | 2-11. |
| Living separately or are legally separated. Fill out Counder penalty of perjury that you and your spouse are lesspouse are living apart for reasons that do not include e | egally separated under | nonbankruptcy law tha | at applies or that you and your |
| Fill in the average monthly income that you received from all bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are August 31. If the amount of your monthly income varied during the Fill in the result. Do not include any income amount more than or income from that property in one column only. If you have nothin | e filing on September 19 ne 6 months, add the ind nce. For example, if bot | 5, the 6-month period come for all 6 months the spouses own the sa | would be March 1 through and divide the total by 6. |
| | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
| Your gross wages, salary, tips, bonuses, overtime, and com (before all payroll deductions). | missions | \$ <u>4,326.08</u> | \$ |
| Alimony and maintenance payments. Do not include payment Column B is filled in. | s from a spouse if | \$ <u> </u> | \$ |
| 4. All amounts from any source which are regularly paid for ho of you or your dependents, including child support. Include from an unmarried partner, members of your household, your de and roommates. Include regular contributions from a spouse only filled in. Do not include payments you listed on line 3. | regular contributions pendents, parents, | \$ <u> </u> | \$ |
| 5. Net income from operating a business, profession, | r 1 Debtor 2 | | |
| or farm Gross receipts (before all deductions) \$ | 0.00 \$ | | |
| Ordinary and necessary operating expenses - \$ | 0.00 - \$ | | |
| Net monthly income from a business, profession, or farm \$ | 0.00 \$ Copy | | \$ |
| 6. Net income from rental and other real property Gross receipts (before all deductions) Debto | r 1 Debtor 2 0.00 \$ | | |
| , , | 0.00 - \$ | | |
| Net monthly income from rental or other real property \$ | Copy 0.00 \$ here | | \$ |
| 7. Interest, dividends, and royalties | | \$ | \$ |

| ebtor 1 | Christopher David Smith First Name Middle Name Last Name | | Case number (if known)_ | | |
|---|--|--|---|--|---|
| | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 3. Unen | nployment compensation | | \$0.00 | \$ | |
| | ot enter the amount if you contend that the amour r the Social Security Act. Instead, list it here: | | | | |
| Fo | r you | \$ | | | |
| Fo | r your spouse | ···· \$ | | | |
| | sion or retirement income. Do not include any ar fit under the Social Security Act. | mount received that was a | \$0.00 | \$ | |
| Do n | me from all other sources not listed above. Sport include any benefits received under the Social struction of a war crime, a crime against humanity, or rism. If necessary, list other sources on a separate | Security Act or payments received or international or domestic | | | |
| | | | \$ | \$ | |
| | | | \$ | \$ | |
| Tota | al amounts from separate pages, if any. | | + \$0.00 | + \$ | |
| | ulate your total current monthly income. Add linn. Then add the total for Column A to the total fo | | \$ <u>4,326.08</u> | + | \$ 4,326.08 Total current monthly income |
| | | | | | |
| Part 2: | Determine Whether the Means Test A | pplies to You | | | |
| | ulate your current monthly income for the year | Follow these steps: | | | |
| | ulate your current monthly income for the year | Follow these steps: | Cc | ppy line 11 here→ | \$4,326.08 |
| 12. Calc ı | ulate your current monthly income for the year | Follow these steps: | Cc | opy line 11 here→ | \$ 4,326.08 x 12 |
| 12. Calcu 12a. | ulate your current monthly income for the year Copy your total current monthly income from line | :. Follow these steps: | Cc | opy line 11 here→ | * |
| 12. Calcu 12a. 12b. | Late your current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). | : Follow these steps: e 11 | Cc | | x 12 |
| 12. Calcu 12a. 12b. 13. Calc | Copy your total current monthly income for the year Multiply by 12 (the number of months in a year). The result is your annual income for this part of the contract of the co | : Follow these steps: e 11 | Cc | | x 12 |
| 12a. 12b. 13. Calc Fill in | Copy your total current monthly income for the year Multiply by 12 (the number of months in a year). The result is your annual income for this part of the the median family income that applies to | the form. you. Follow these steps: | Cc | | x 12 |
| 2. Calcu 12a. 12b. 3. Calcu Fill in Fill in To fir | Copy your total current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the ulate the median family income that applies to the state in which you live. | the form. you. Follow these steps: Washington 1 of household | | 12b. [| x 12 |
| 12. Calcu 12a. 12b. 13. Calcu Fill in Fill in To fir instru | Lalate your current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the state in which you live. In the number of people in your household. In the median family income for your state and size and a list of applicable median income amounts, go | the form. you. Follow these steps: Washington 1 of household | | 12b. [| x 12 \$_51,912.96 |
| 12. Calcu 12a. 12b. 13. Calcu Fill in Fill in To fir instru | Copy your total current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the ulate the median family income that applies to a the state in which you live. In the number of people in your household. In the median family income for your state and size and a list of applicable median income amounts, go ductions for this form. This list may also be available do the lines compare? | the form. you. Follow these steps: Washington 1 of household | he separate | 12b. [| x 12 \$_51,912.96 |
| 12. Calcu 12a. 12b. 13. Calcu Fill in Fill in To fir instru | Lilate your current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the state in which you live. In the state in which you live. In the number of people in your household. In the median family income for your state and size and a list of applicable median income amounts, go unctions for this form. This list may also be available to the lines compare? Line 12b is less than or equal to line 13. On the Go to Part 3. | the form. you. Follow these steps: Washington 1 of household | he separate ere is no presumptio | 12b. [| x 12 \$_51,912.96 \$_63,376.00 |
| 12. Calcu 12a. 12b. 13. Calcu Fill in Fill in To fir instru 14. How | Late your current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the state in your annual income that applies to a the state in which you live. In the number of people in your household. In the median family income for your state and size and a list of applicable median income amounts, go uctions for this form. This list may also be available to the lines compare? Line 12b is less than or equal to line 13. On the Go to Part 3. Line 12b is more than line 13. On the top of part in the state in which your state and size and a list of applicable median income amounts, go uctions for this form. This list may also be available to the lines compare? | the form. you. Follow these steps: Washington 1 of household | he separate ere is no presumptio | 12b. [| x 12 \$_51,912.96 \$_63,376.00 |
| 12. Calcu 12a. 12b. 13. Calcu Fill in Fill in To fir instru 14. How 14a. [| Lalate your current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the state in your annual income that applies to the state in which you live. In the number of people in your household. In the median family income for your state and size and a list of applicable median income amounts, go unctions for this form. This list may also be available to the lines compare? Line 12b is less than or equal to line 13. On the Go to Part 3. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. | the form. you. Follow these steps: Washington 1 of household online using the link specified in the at the bankruptcy clerk's office. the top of page 1, check box 1, The age 1, check box 2, The presumption. | he separate ere is no presumption tion of abuse is dete | 12b. [| x 12 \$ 51,912.96 \$ 63,376.00 |
| 12. Calcu 12a. 12b. 13. Calcu Fill in Fill in To fir instru 14. How 14a. [| Copy your total current monthly income for the year Copy your total current monthly income from line Multiply by 12 (the number of months in a year). The result is your annual income for this part of the result is your annual income for this part of the state in which you live. In the state in which you live. In the number of people in your household. In the median family income for your state and size and a list of applicable median income amounts, go uctions for this form. This list may also be available to the lines compare? Line 12b is less than or equal to line 13. On the Go to Part 3. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. Sign Below | the form. you. Follow these steps: Washington 1 of household online using the link specified in the at the bankruptcy clerk's office. the top of page 1, check box 1, The age 1, check box 2, The presumption. | he separate ere is no presumption tion of abuse is dete | 12b. [| x 12 \$ 51,912.96 \$ 63,376.00 |

Date MM / DD / YYYY

Date MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A–2 and file it with this form.

| Fill in this information to identify your case: | | | | | |
|---|----------------------------------|----------------|-------------------|--|--|
| Debtor 1 | Debtor 1 Christopher David Smith | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: _ | DISTRICT OF WA | ASHINGTON EASTERN | | |
| Case number(If known) | | | | | |

☐ Check if this is an amended filing

Official Form 122A-1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2)

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

| 1. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). | | | | |
|----|--|---|--|--|--|
| | □ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, <i>There is no presumption of abuse</i> , and sign Part 3. Then submit this supplement with the signed Form 122A-1. | | | | |
| | Yes. Go to Part 2. | | | | |
| Pá | art 2: Determine Whether Military Service Provisions Apply to You | | | | |
| 2. | Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))? | | | | |
| | ☑ No. Go to line 3. | | | | |
| | Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1)); 32 U.S.C. § 901(1). | | | | |
| | ☐ No. Go to line 3. | | | | |
| | ☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1 Then submit this supplement with the signed Form 122A-1. | , There is no presumption of abuse, and sign Part 3. | | | |
| 3. | Are you or have you been a Reservist or member of the National Guard? | | | | |
| | ☑ No. Complete Form 122A-1. Do not submit this supplement. | | | | |
| | ☐ Yes. Were you called to active duty or did you perform a homeland defense active | vity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1). | | | |
| | ☐ No. Complete Form 122A-1. Do not submit this supplement. | | | | |
| | Yes. Check any one of the following categories that applies: | | | | |
| | ☐ I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty. | If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, | | | |
| | ☐ I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, | check box 3, <i>The Means Test does not apply now,</i> and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of | | | |
| | which is fewer than 540 days before I file this bankruptcy case. | Official Form 122A-1 during the exclusion period. The | | | |
| | I am performing a homeland defense activity for at least 90 days. | exclusion period means the time you are on active duty | | | |
| | or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii). | | | | |

Official Form 122A-1Supp

before I file this bankruptcy case.

ending on _

_____, which is fewer than 540 days

If your exclusion period ends before your case is closed,

you may have to file an amended form later.

UNITED STATES BANKRUPTCY COURT

DISTRICT OF WASHINGTON EASTERN

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/s/ Christopher David Smith
Christopher David Smith
Debtor

Dated: May 9, 2018

UNITED STATES BANKRUPTCY COURT DISTRICT OF WASHINGTON EASTERN

| In Re: | Case I | No. |
|---|--|--|
| Christopher David Smith | | |
| Debtor(s) | | |
| | ATION RE: ELECTRO | |
| PART I - DECLARATION OF PETITIONER | ₹ | |
| the information provided in the electronically filed production for to electronic filing. I consent to my Bankruptcy Court. I understand that this DECLARA and filed with the Trustee. I understand that failure dismissed pursuant to 11 U.S.C. § 707(a)(3) without the control of | petition, statements, and so y attorney sending my petit ATION RE: ELECTRONIC to file the signed and date ut further notice. I (we) furt Official Form B21), prior to | debtor(s), hereby declare under penalty of perjury that chedules is true and correct and that I signed these tion, statements and schedules to the United States FILING is to be executed at the First Meeting of Creditors and original of this DECLARATION may cause my case to be therefore under penalty of perjury that I (we) signed the the electronic filing of the petition and have verified the 9-to be accurate. |
| aware that I may proceed under chapter 7, 11, 12 chapter, and choose to proceed under this chapter | or 13 of Title 11, United Start. I request relief in accordarder penalty of perjury the | s and who has chosen to file under a chapter: I am ates Code, understand the relief available under each ance with the chapter specified in this petition. I (WE) nat the information provided in the electronically filed |
| | that I have been authorized | of perjury that the information provided in the debtor. The debtor |
| | d within 120 days of the fili | fy that I completed an application to pay the filing fee ng date of filing the petition, the bankruptcy case may |
| Dated: May 9, 2018 | | |
| Signed: /s/ Christopher David Smith | | |
| (Applicant) | | (Joint Applicant) |
| PART II - DECLARATION OF ATTORNEY | • | |
| Statement of Social Security Number(s) (Official For the United States Bankruptcy Court, and have follouncluding submission of the electronic entry of the offurther declare that I have informed the petitioner (| orm B21) before I electronioned all other requirements debtor(s) Social Security nif an individual) that [he or | etition, schedules, statements, etc., including the ically transmitted the petition, schedules, and statements to s in Administrative Orders and Administrative Procedures, umber into the Court's electronic records. If an individual, I she] may qualify to proceed under chapter 7, 11, 12 or 13 or each chapter. This declaration is based on the information |
| Dated: May 9, 2018 | Attorney for Debtor(s | /s/ Gregory L. Lutcher |
| | | Gregory L. Lutcher |
| | Address of Attorney | 6 E. Alder, Ste 317 |
| | | Walla Walla, Washington 99362 |

United States Bankruptcy Court DISTRICT OF WASHINGTON EASTERN

| [n | re | Christopher David Smith | | |
|---|------------|---|---|--|
| | | • | Case No | |
| Debtor | | • | Chapter 7 | |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR | | | | |
| 1. | nar bar | rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certimed debtor(s) and that compensation paid to me within one yean kruptcy, or agreed to be paid to me, for services rendered or to intemplation of or in connection with the bankruptcy case is as for | r before the filing of the petition in be rendered on behalf of the debtor(s) in | |
| | For | r legal services, I have agreed to accept | \$ 1,235.00 | |
| | Pri | ior to the filing of this statement I have received | \$ <u>1,235.00</u> | |
| | Bal | lance Due | \$ 0.00 | |
| 2. | The | e source of the compensation paid to me was: | | |
| | | Debtor Other (specify) | | |
| 3. | The | e source of compensation to be paid to me is: | | |
| | | Debtor Other (specify) | | |
| 4. | | X I have not agreed to share the above-disclosed compensate members and associates of my law firm. | ion with any other person unless they are | |
| | | I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the agreement people sharing in the compensation, is attached. | | |
| 5. | | return for the above-disclosed fee, I have agreed to render legal se, including: | service for all aspects of the bankruptcy | |
| | a. | Analysis of the debtor's financial situation, and rendering adville a petition in bankruptey; | vice-to-the debtor-in-determining-whether to | |
| | b. | Preparation and filing of any petition, schedules, statements o | f affairs and plan which may be required; | |
| | c. | Representation of the debtor at the meeting of creditors and cohearings thereof: | onfirmation hearing, and any adjourned | |

Date

B2030 (Form 2030) (12/15) d. Representation-of-the-debtor-in-adversary-proceedings and other-contested-bankruptey-matters;e. [Other provisions as needed] LEGAL SERVICES AMOUNT INCLUDES FILING FEE 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: representation of debtor in any adversary or other contested bankruptcy matters CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. May 9, 2018 /s/ Gregory L. Lutcher

Signature of Attorney **Gregory L. Lutcher, PS** Name of law firm